DOCUMENT RESUME

ED 191 574 PS 011 673

TITLE	The Status of Children, Youth and Families 1979.
INSTITUTION	Administration for Children, Youth, and Families (DHEW), Washington, D.C.
SPONS AGENCY	Systems Research and Development Corp., Research Triangle Park, N.C.
REPORT NO	DHES-OHDS-80-30274
PUB DATE	Aug 80
CONTRACT	105-79-1300
NOTE	257p.: Tables and charts marginally legible.
EDRS PRICE	MF01/PC11 Plus Postage.
DESCRIPTORS	Adolescents: *Child Development: *Children: Cognitive Development: Demography: Education: *Family (Sociological Unit): Family Income: Family Programs: Health: Infants: Nutrition: Population Trends: Preschool Children: *Research: Socioeconomic Status: *Status: *Youth: Youth Employment: Youth Problems

ABSTRACT

This publication, third in a biennial series of reports, focuses on the status of children, youth and families in 1979. Chapter I discusses historical and current demographic and economic trends that have occurred in the characteristics and circumstances of the United States population. Chapter II attempts to capture the factor of time in human development (from conception to death) and identifies characteristics and potential problems of the various stages of life. Chapters III, IV and V discuss aspects of the status of children (number and distribution, economic environment, health and nutrition, and education): the status of youth (population growth, health, conditions and trends in education, employment, and special youth problems): and the status of families (employment and income, women in families, health, and programs affecting families). Several trends that characterize present research relating to children, youth and families are discussed in Chapters VI, VII, and VIII. (Author/MP)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY.

THE STATUS OF CHILDREN, YOUTH AND FAMILIES 1979

John A. Calhoun
Commissioner
Administration for Children, Youth and Families

Edith H. Grotberg, Ph.D.
Director
Research, Demonstration and Evaluation Division

W. Ray Rackley, Ph.D.
Social Science Research Analyst

Portions of this book were developed under
Contract No. 105-79-1300 with
Systems Research and Development Corporation

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of Human Development Services
Administration for Children, Youth and Families
Research, Demonstration and Evaluation Division

DHHS Publication No. (OHDS) 80-30274
Issued August 1980

ED191574

PS011673

ACKNOWLEDGEMENTS

This volume results from various efforts of a wide range of groups and individuals. The Interagency Panel on Early Childhood Research and Development and the Interagency Panel for Research and Development on Adolescence formed a joint committee to develop the outline of the volume. This approach assured wide consideration of issues about the conditions of children, youth, and families because the Panels include members from all agencies supporting research relating to these conditions.

Several individuals were asked to contribute the chapters on the status of research on children, youth, and families and each accepted. These chapters are a main new contribution to the biennial report and should provide readers with a summary of what we know from the research. The chapter on the family, also a new one, was written by another expert who has integrated knowledge about the status of families over the years. The contractor, Systems Research and Development Corporation, organized the vast amounts of information provided them and wrote large sections of many of the chapters. Finally, W. Ray Rackley, with the help of Dorothy O'Connell, put the book together for publication.

The efforts were complex, the participation of the various groups and individuals was time consuming, and the results reflect synthesis and resolution which were possible only because of a basic commitment to the outcome.

Edith H. Grotberg, Ph.D.
Director
Research, Demonstration and Evaluation Division
Administration for Children, Youth and Families

PROLOGUE

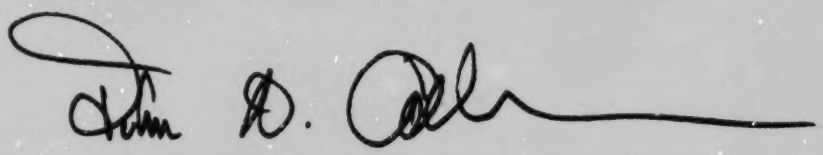
The Status of Children, Youth, and Families 1979 is the third in the biennial series of reports on the conditions of children, youth, and families. A number of changes appears as a result of expanded interests and new areas of concern in the nation. But there is also a continuity of basic data so that trends of conditions may be traced over time.

The changes in the 1979 report start with the title. Both in 1975 and in 1977, the book was entitled *The Status of Children.* Because of the expanded mandate for the Administration for Children, Youth, and Families and because of the increased awareness of the significance of the family in child and youth development, the 1979 book includes the broader scope, even in its title.

Other changes include new chapters that not only reflect the expanded mandate of ACYF but also reflect new approaches to reporting. A new chapter, for example, is Chapter 2: Life Cycle Development. This chapter attempts to capture the factor of time in human development from conception to death and identifies characteristics of the various stages of life and some of the potential problems. Chapter 6: Status of Research on Children; Chapter 7: Status of Research on Youth; and Chapter 8: Status of Research on Families are entirely new in the biennial series. They are added because research is recognized increasingly as an aid in understanding the nature of the conditions of children, youth, and families and can provide us with knowledge about how to improve or prevent these conditions. Research is used increasingly by both the Executive and Legislative branches of Government to help formulate policies that address the social and economic issues critical to children, youth, and families.

There are some real limitations that stem primarily from limited and biased data sources. Two of these limitations illustrate the problem. Data are extremely limited on all minority groups, with the exception of blacks, and information on undocumented immigrants is virtually nonexistent. These are serious omissions because many people from minority groups need and are entitled to aid and support. Funding for programs, dependent on counted numbers of people, often falls well below the needed mark, because of undercounting. The problem of biased data is more a reflection of historical factors than deliberate biasing. An example of data bias is the tendency to use the individual and not the family as the basic unit of concern. Thus, when health or welfare services are under consideration, it is the number of individuals who need help by health condition or dependency status that determines government response. When the family, for example, is used as the basic unit of concern, the picture changes. Family health and family economic supports would then be the focus more than the individual. It is only very recently that the Department of Labor, to illustrate the point further, has decided to use the family as a basic economic unit. The profile of family income, DOL has learned, changes dramatically when using individual income as an indicator of economic well-being compared to using family income as such an indicator.

ACYF, sensitive to its responsibility to report on the status of conditions of children, youth, and families, will continue to seek out new and increasingly appropriate data for that reporting. These data help to determine areas of present and future social issues requiring policy decisions to assure the enrichment of life for the citizens of the nation.



John A. Calhoun
Commissioner
Administration for Children, Youth and Families

TABLE OF CONTENTS

PAGE

ACKNOWLEDGEMENTS i

PROLOGUE iii

CHAPTER 1 DEMOGRAPHIC AND ECONOMIC TRENDS

Growth and Population Trends 1
- Components of Change
- Mortality
- Age Composition of the United States
- Migration Patterns in the United States

Economic Status 17
- Trends in the Labor Force
- Income and Poverty
- Housing and Neighborhoods
- Travel to School and Work

Bibliography 26

CHAPTER 2 LIFE CYCLE DEVELOPMENT

Introduction 29

Intrauterine Development 30
- Fetal Growth and Development
- Family Growth and Development
- Factors Affecting Growth and Development
  - Maternal Emotional Status
  - Maternal Prenatal Care
  - Maternal Nutrition
  - Maternal Age

Infancy: First Two Years 32
- Birth
- Neonatal Period
- Growth and Development
- Family Growth and Development
- Infant Mortality
  - Sudden Infant Death Syndrome
- Factors Affecting Growth and Development
  - Childhood Diseases
  - Immunizations
- Child Abuse and Neglect

Preschool: 2 to 6 Years 38
- Growth and Development
- Family Growth and Development
- Factors Affecting Growth and Development
  - Preschool Preparation
  - Day Care
  - Nutrition

CHAPTER 2 (continued)

Early School Years: 6 to 12 Years 42
- Growth and Development
- Family Growth and Development
- Factors Affecting Growth and Development
  - Accidents
  - Mental Retardation
  - Nutrition

Prepubescent and Adolescent Years 45
- Growth and Development
- Family Growth and Development
- Problems Encountered by Teenagers
  - Sexually Transmissible Diseases
  - Teenage Pregnancies
  - Teenage Unemployment

Summary 48

Bibliography 49

CHAPTER 3 STATUS OF CHILDREN

Numbers and Distribution 51
- General
  - Mobility
  - Ethnic and Regional Distribution
- Family Setting
  - Effects of Divorce
  - Step-Families
  - Children Not in Families

Economic Environment of the Child 56
- Family Income
  - Family Budget
- Children and Poverty
- Government Programs

Health and Nutrition 59
- Infant Mortality
  - Low Birthweight
  - Birth Defects
  - Sudden Infant Death Syndrome
- Death and Disease After 1 Year of Age
  - Accidents
  - Infectious Disease
  - Respiratory Disease
- A Special Problem: The Abused Child
  - Effects of Child Abuse
  - Programs
- Poverty and Health
- Mental Health of Children
  - Minority Children
  - Identification of High Risk Child Population
- Government Programs
- Use of Medical Services
- Changes in View on Health and Nutrition

CHAPTER 3 (continued)

Education 67
Trends in Enrollment
Preprimary Enrollment and Working Mothers
Head Start and Day Care
Head Start
Day Care
School Progress and Failure
Government Educational Programs
New Program for Handicapped Children
Requirements of Public Law 94-142
Kinds of Children Served
Bilingual Education
Educational Programs for Migrant Children
Television
Bibliography 77

CHAPTER 4 STATUS OF YOUTH

Introduction 81
Change in Youth Population from 1970 to 1979 81
Health of Adolescents and Young Adults 84
Youth Mortality
Traumatic Deaths
Fatal Motor Vehicle Accidents
Homicide
Suicide
Sexually Transmissible Diseases
Federal Health Goals for Youth
Conditions and Trends in Education 88
Enrollment in Secondary Education
Progress through School
Minimum Competency Testing
Postsecondary Education
Vocational School Experience
Participation in Higher Education
Educational Outcomes
Diplomas and Degrees Awarded
The Federal Effort in Education
Youth Employment 97
Historical Trends
Racial Differentials Among Young Men
Differentials Among Young Women
Explaining the Unemployment Situation
A Crowded Market?
"Priced-out" by Minimum Wage?
Job Suburbanization and Skill Mismatch?
Influx of Women?
Other Explanations
Federal Employment and Training Programs for Youth

CHAPTER 4 (continued)

Special Youth Problems 105
Juvenile Delinquency
Alcohol and Drug Misuse
Adolescent Abuse and Neglect
Teenage Pregnancy
Runaway Youth
Summary 113
Bibliography 114

CHAPTER 5 STATUS OF FAMILIES

Introduction 115
Employment and Income of Families 118
Women in Families 127
Health Status 132
Selected Health Problems Involving Families
Infant Mortality
Adolescent Pregnancy
Domestic Violence
Health Goals
Programs Affecting Families 143
Income Security Programs
The Medicaid Program
The Work Incentive Program
Social Service Programs
Overview of Programs
Summary 148
Bibliography 151

CHAPTER 6 STATUS OF RESEARCH ON CHILDREN

Changing Trends in Research on Children 153
Biological Influences on Development
Interaction within Families
The Family in Context
Recent Research on Children: Some Key Issues of
Current Interest 157
Child Abuse
Day Care
The School as a Socializing Agent
Intervention and "Compensatory Education"
Conclusion 163
References 164

CHAPTER 7 STATUS OF RESEARCH ON YOUTH

Somatic Health 172
Mental Health 172

CHAPTER 7 (continued)

Assessment, Prevention, and Treatment
Automobile Accidents and Suicide
Anorexia Nervosa
Substance Abuse
Adolescent Pregnancy and Sexual Expression
Intellect and Special Abilities 176
Cognitive Development and Socialization 177
Generality of Formal Operations
Moral Development
Delinquency: Adjudication and Prevention 178
Adolescence and Work 180
Work Ideology
Factors in the High School-to-Work Transition
Current Applied Policy Initiatives
Conclusion 183
References 184

CHAPTER 8 STATUS OF RESEARCH ON FAMILIES

Long-term Trends in Family Research 191
Increasing Quantity of Publications
Increasing Respectability
From Macroscopic to Microscopic Studies
More Coordination of Research Efforts
Documenting, Testing Hypotheses, and Cumulating Theory
Increasing Attention to Scientific Method
Emerging Tendencies in Family Research 211
Perspective Taking
Increasing Multidisciplinary Research on Marriage and Family Behavior
Cracking the Family Nucleus through Interaction Process Analysis
Reemphasis on Family Transactions within Social Networks
Changing Emphasis to Later Stages of Family Development
Increase in Responsiveness of Family Research to Newly Defined Social Problems
Attention to the Pluralism of Family Patterns in the United States
Research Orientation to the Impacts of Public Policy on the Family
Some Points of Controversy that Persist in Family Research
Summary of Achievements and Prospects 231
Footnotes 234
References 239

CHAPTER 1

DEMOGRAPHIC AND ECONOMIC TRENDS

This chapter discusses the changes that have occurred in the characteristics and circumstances of the U.S. population. For the purposes of this chapter, these changes, or demographic trends, are grouped under two main topics. The first topic involves the changes in the components of population growth, as well as changes in migration patterns within the United States. The second topic involves economic conditions and trends, and income and related characteristics of the population. These two main topics correspond to the two major sections within this chapter.

Growth and Population Trends

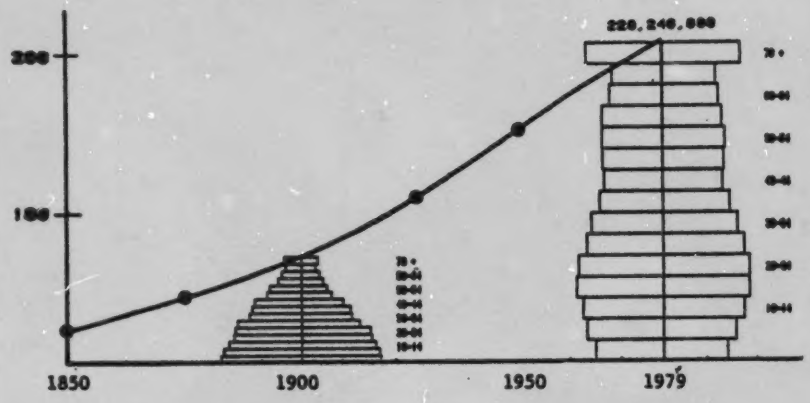
Despite immigration and high birth rates, the population in North America at first grew very slowly. Estimates place the total population at well under 1 million in the early 1700s, and at less than 3 million at the time of the American Revolution. However, by the mid-1700s, there had been a rapid growth in population, driven largely by explosive birth rates. Thus, the population grew – despite very high infant and maternal death rates and generally short life expectancies. By 1979, the population of the U.S. had grown to over 220 million – roughly a 70-fold increase in the 203 years since the American Revolution.

Exhibit 1.1 shows the trend in population growth since 1850. It also illustrates the "population pyramids" for 1900 and 1979, which show the proportion of the total population by age category, and in addition, show the relative proportion of males and females in each age category. (The age pyramid data will be discussed more fully later in this section.) The population in 1970 was 1.8 million larger than in the preceding year, which represented an annual growth rate of .008, or less than 1%. The lowest growth rate was reached in 1973 (.007, or .7%). The growth rates in these years were less than half the growth rates in the late 1940s, through the 1950s, and for the first few years in the 1960s (Bureau of the Census, "Estimates of the population of the United States and components of change: 1940 to 1978").

In 1979, the white population reached 190 million, and the nonwhite population reached 30 million, 26 million of whom were blacks (see Exhibit 1.2). During both 1977 and 1978, whites increased at an annual rate of 0.62%, a rate slightly higher than during the previous 4 years. The white population grew at an average annual rate of almost 0.7% during the 1970s, compared with nearly 1.2% during the 1960s.

Blacks increased at an annual rate of over 1.4% in 1977 and 1978, a rate slightly higher than for the previous 4 years. The average annual growth rate for blacks was 1.5% during the 1970s, a decline from 1.8% in the 1960s.

Exhibit 1.1. Population of the United States from 1850 to 1979 and age-sex composition in 1900 and 1979.



Sources: N.C.H.S. Monthly Vital Statistics Report, July 1979; and Age structure of the U.S. population in the 20th century, Washington: Population Reference Bureau, Inc., 1978.

The overall annual rate of growth for all nonwhites was about 1.9% in 1977, compared with 2.3% in 1975. During the 1970s, all nonwhites increased at an average annual rate of 1.9%, compared with 2.1% during the 1960s. In 1979, nonwhites comprised 13.6% of the nation's population, an increase from 11% in 1960 and 12% in 1970.

Components of Change

Population change is the net result of three components of change: births, deaths, and immigration. Data are shown in Exhibit 1.3. The excess of births over deaths comprises natural increase.

Among whites, the natural increase rate of 0.53% in 1978 accounted for 85% of the year's population growth. This was down slightly from the 0.54% natural increase rate in 1977, which comprised 87% of the growth. Natural increase rates among whites varied from 0.45% to 0.78% during the 1970s and averaged 0.55%, a decline from the average of 0.99% during the 1960s. Natural increase as a proportion of white population growth averaged about 83.5% during both decades, however.

In 1978, the rate of natural increase in the black population was 1.24%. Rates of natural increase for blacks have been higher than rates among whites, and natural increase as a proportion of black population growth averaged 88% during the 1970s. Among nonwhites, other than blacks, the annual rate of natural increase has been somewhat greater than for blacks. Natural increase as a proportion of population growth, however, has averaged only 70% among all nonwhites since 1970, caused by immigration rates, as suggested by Exhibit 1.2.

Exhibit 1.2. Estimates of the components of population change for the United States, by race: 1960 to 1978.

(Numbers in thousands. Includes Alaska and Hawaii in all years. For meaning of symbols, see text)

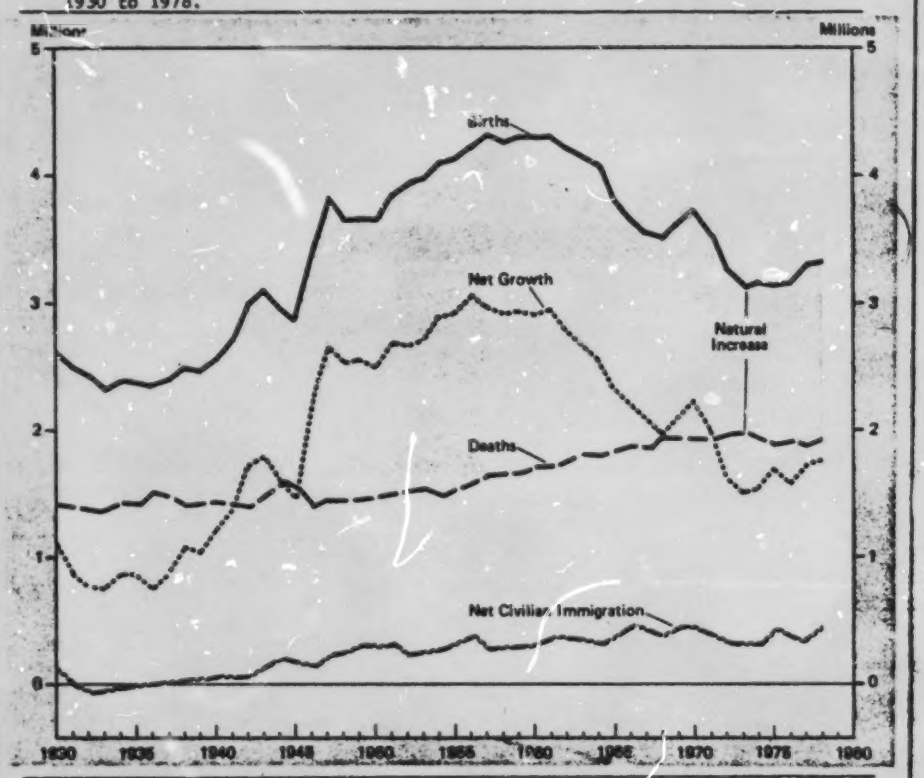
CALENDAR YEAR	POPULATION AT BEGINNING OF YEAR	PERCENT CHANGE[1]	NET CHANGE[2]	COMPONENTS OF CHANGE DURING YEAR				RATE PER 1,000 MIDYEAR POPULATION				
				NATURAL INCREASE	BIRTHS[3]	DEATHS[4]	NET CIVILIAN IMMIGRATION	NET CHANGE	NATURAL INCREASE	BIRTHS	DEATHS	NET CIVILIAN IMMIGRATION
WHITE												
1978	169,578	...	...	...	...	...	...	...	...	...	...	...
1977	166,393	0.82	1,176	1,000	2,000	1,000	188	7.1	6.1	14.3	8.9	0.9
1976	165,230	0.88	1,140	1,000	2,076	1,071	135	6.9	6.1	14.3	8.9	0.8
1975	164,154	0.88	1,076	992	2,060	1,070	184	6.6	6.0	12.8	8.8	1.0
1974	163,099	0.87	1,063	991	2,992	1,001	172	6.7	6.0	13.8	8.0	0.9
1973	162,054	0.87	1,082	970	2,976	1,006	175	6.7	6.0	14.0	8.2	0.9
1972	160,972	0.86	1,010	922	2,931	1,729	170	6.5	6.0	13.9	8.0	1.1
1971	159,962	0.63	1,137	933	2,896	1,723	194	6.2	6.1	15.6	9.6	1.1
1970	158,825	0.83	1,483	1,338	2,920	1,692	255	6.8	6.8	16.1	9.3	1.4
1969	178,692	0.96	1,713	1,408	3,095	1,687	327	6.5	7.8	17.2	9.4	1.8
1968	177,007	0.97	1,625	1,316	3,010	1,694	304	9.1	7.4	16.9	9.5	1.8
1967	175,340	0.87	1,519	1,228	2,930	1,705	317	9.6	7.0	16.6	9.7	1.8
1966	173,827	0.92	1,602	1,305	2,960	1,636	302	9.3	7.5	16.8	9.4	1.8
1965	172,187	1.01	1,740	1,371	3,011	1,640	390	10.1	7.9	17.4	9.5	2.3
1964	170,336	1.09	1,850	1,536	3,149	1,607	333	10.9	9.0	18.4	9.4	1.9
1963	168,366	1.23	2,070	1,811	3,391	1,580	286	12.3	10.7	20.0	9.3	1.7
1962	166,296	1.31	2,170	1,870	3,462	1,592	325	13.0	11.2	20.7	9.5	1.9
1961	163,815	1.39	2,281	1,984	3,530	1,546	328	13.8	12.0	21.4	9.4	2.0
1961	161,367	1.52	2,448	2,127	3,626	1,499	345	15.1	13.1	22.3	9.2	2.1
1960	158,994	1.52	2,409	2,123	3,625	1,502	307	15.1	13.3	22.7	9.4	1.9
BLACK AND OTHER RACES												
1978	29,960	...	...	...	...	...	175	...	...	...	...	...
1977	29,392	1.93	569	394	629	235	175	19.2	13.3	21.2	7.9	5.9
1976	28,824	1.97	568	408	657	249	160	19.5	14.0	21.9	7.9	5.5
1975	28,269	1.89	535	366	600	234	169	18.7	12.8	21.0	8.2	5.9
1974	27,693	2.30	636	366	592	227	270	22.7	12.8	21.1	8.3	9.7
1973	27,106	1.88	498	369	596	227	142	17.8	12.7	21.3	8.7	5.2
1972	26,608	1.70	478	341	586	245	137	17.0	12.7	21.8	9.1	4.9
1971	26,201	1.85	486	360	603	243	126	18.6	13.6	22.8	9.2	4.8
1970	25,671	2.06	529	390	636	246	131	20.6	15.0	24.5	9.5	5.1
1969	25,157	2.04	510	394	644	250	111	20.3	15.6	25.6	9.6	4.4
1968	24,693	1.88	463	360	630	269	99	18.6	15.3	25.9	9.6	3.9
1967	24,260	1.73	423	341	608	267	81	17.7	14.8	25.7	9.9	3.3
1966	23,899	1.60	401	330	615	286	71	16.8	14.2	25.6	9.6	2.9
1965	23,552	1.96	457	402	631	229	64	19.6	17.0	26.8	9.7	2.7
1964	22,887	2.03	465	428	657	223	48	20.1	18.0	28.4	9.6	1.7
1963	22,403	2.16	484	440	668	220	32	21.0	19.3	29.0	9.7	1.4
1962	21,917	2.21	485	457	679	222	27	21.9	20.6	30.7	10.0	1.2
1961	21,429	2.29	491	471	683	212	20	22.7	21.7	31.5	9.8	1.0
1961	20,938	2.42	507	488	691	203	20	24.0	23.0	32.7	9.8	1.0
1960	20,430	2.41	492	478	682	206	20	23.8	23.0	33.0	10.0	1.1
BLACK												
1978	25,763	...	...	...	...	...	43	...	...	...	...	...
1977	25,403	1.42	360	318	538	220	42	14.1	12.4	21.0	8.6	1.6
1976	25,036	1.48	370	331	566	235	39	14.7	13.1	21.7	8.5	1.5
1975	24,697	1.36	337	295	515	220	42	13.5	11.9	20.5	8.6	1.7
1974	24,382	1.36	332	294	512	218	38	13.5	12.0	20.9	8.9	1.6
1973	24,068	1.38	323	284	507	223	39	13.4	11.7	21.0	9.2	1.6
1972	23,722	1.35	320	282	513	230	38	13.4	11.8	21.5	9.6	1.6
1971	23,384	1.45	338	303	531	229	35	14.4	12.9	22.6	9.7	1.5
1970	23,001	1.66	382	340	565	225	42	16.5	14.7	24.4	9.7	1.8
1969	22,617	1.70	385	349	575	226	36	16.9	15.3	25.3	9.9	1.7
1968	22,232	1.67	371	328	565	237	34	16.4	14.6	24.6	10.1	1.4
1967	21,861	1.46	320	315	545	230	33	14.3	14.2	24.0	10.0	1.5
1966	21,623	1.60	346	348	589	240	28	15.9	15.9	25.7	9.8	1.3
1965	21,269	1.66	354	357	575	217	24	16.8	16.7	26.6	10.1	1.1
1964	20,889	1.82	380	388	599	211	21	18.4	18.8	28.5	10.0	1.0
1963	20,479	2.01	411	427	638	211	21	19.9	20.2	30.3	10.1	1.0
1962	20,034	2.01	404	410	631	221	22	20.0	20.3	30.7	10.4	1.1
1961	19,644	2.06	404	422	626	204	15	20.6	21.3	31.6	10.3	0.8
1961	19,237	2.22	427	446	633	193	16	22.0	22.6	32.3	9.9	0.8
1960	18,817	2.23	420	429	629	199	12	22.1	22.6	33.9	10.3	0.6

[1] PERCENT OF POPULATION AT BEGINNING OF PERIOD.
[2] INCLUDES ESTIMATES OF OVERSEAS ADMISSIONS INTO AND DISCHARGES FROM THE ARMED FORCES AND THE ERROR OF CLOSURE BETWEEN CENSUSES.
[3] ADJUSTED FOR UNDERREGISTRATION THROUGH MARCH 1970.
[4] DEATHS OCCURRING IN THE UNITED STATES PLUS ESTIMATED DEATHS OCCURRING TO ARMED FORCES OVERSEAS. INFANT DEATHS ADJUSTED FOR UNDERREGISTRATION THROUGH MARCH 1960.

Source: U.S.Bureau of the Census. Estimates of the population of the United States and components of change: 1940 to 1978. Current Population Reports. Series P-25, No. 802, p. 9. 1979.

Fertility rates are affected by such factors as the marriage rate; age at marriage; contraception and abortion; age-sex structure; and economic, occupational, and educational levels of the population. Birth rates have shown a general decline of about 38% during the past 2 decades. Prior to that, there was a higher birth rate that began after World War II and was maintained for a decade until the downturn after 1957. This "baby boom" had been preceded by about 15 years of low birth rates during the war and the preceding Depression.

Exhibit 1.3. Annual levels of net growth, births, deaths, and net immigration: 1930 to 1978.

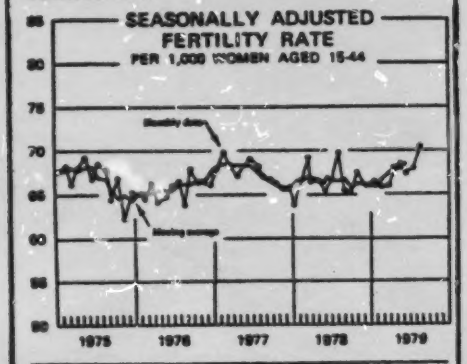


Source: U.S. Bureau of the Census. Estimates of the population of the United States and components of change: 1940 to 1978. Current Population Reports. Series P-25, No. 802. 1979. Cover.

Overall, however, the trend has been to lower birth rates. A racial breakdown of birth rates shows a pattern consistent with the overall trend. Among whites, the crude birth rate has been over 1.4% since 1977, higher than during the previous 4 years (see Exhibit 1.2). Among blacks, the rate has hovered around 2.1% in recent years. The rates for all nonwhites have been about 1½ times higher than white birth rates for at least 2 decades. Among white and nonwhite races, a noticeable drop in birth rates occurred early in the 1970s.

The fertility rate is the number of live births per 100 women, ages 15 to 44. The overall fertility rate from January to October 1979 was 6.8%, slightly higher than for 1978 (see Exhibit 1.4). Exhibit 1.5 shows general fertility rates for whites and nonwhites during the past 3 decades. While crude birth rates for whites were about two-thirds of nonwhite rates, the general fertility rates for whites are somewhat more than two-thirds of those for nonwhites. This is caused by the higher proportion of elderly in the white population, which tends to depress the white crude birth rate relative to the nonwhite crude birth rate.

Exhibit 1.4.



Source: N.C.H.S. Monthly Vital Statistics Report. Vol. 20, No. 10, January 1980 (for October 1979).

Exhibit 1.5. General fertility rates per 100 women aged 15-44, from 1952-1977, by race.

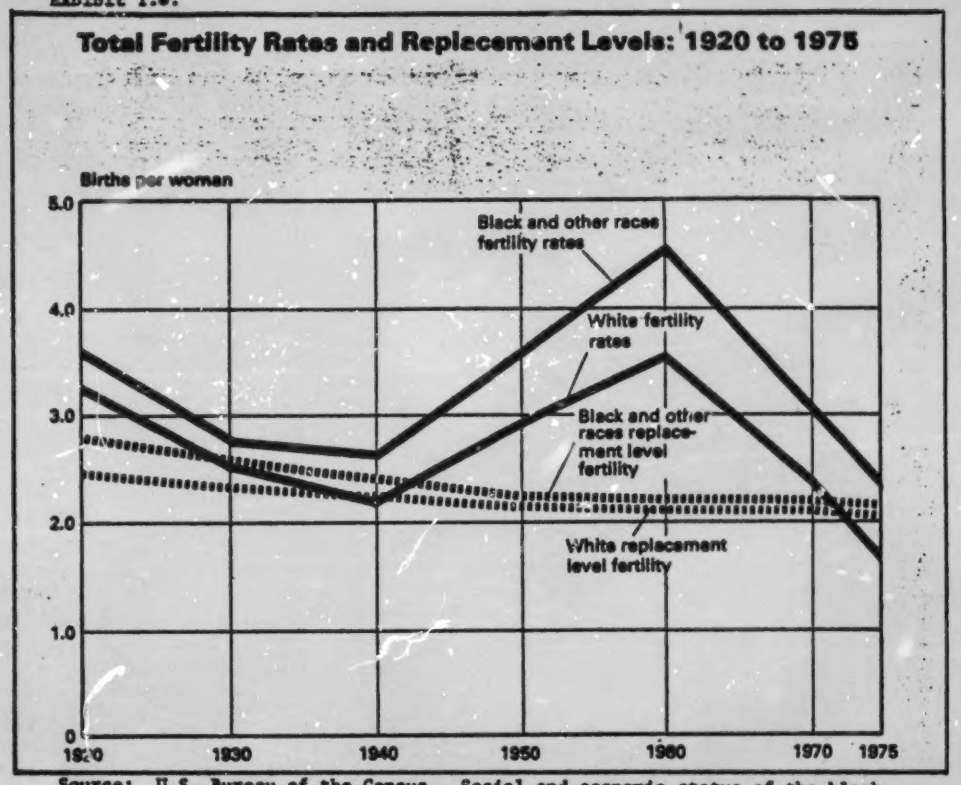
YEAR	WHITE	NON-WHITE
1977	6.4	9.0
1972	6.9	10.0
1967	8.3	12.0
1962	10.8	14.9
1957	11.8	16.2
1952	11.0	14.3

Source: Bureau of the Census. Current Population Survey. June 1978.

The "total fertility rate" is the total number of children that will be born to women during their lives if they continue to conform to the age-specific birth rates of a given year. In the early 1970s, total fertility in the U.S. dropped below replacement level. The rate has been about 1.8 children per woman for the last several years. The population continues to grow, however, because it will take several decades for births and deaths to reach equilibrium and because of immigration. Then, too, fertility rates may increase in time.

Exhibit 1.6 shows the racial differential in total fertility rates. The overall subreplacement fertility since the early 1970s has been the result of the white component. Nonwhites, while basically paralleling the trends for whites, have been approaching a given subreplacement rate about a decade later than the whites, as suggested by Exhibit 1.6.

Exhibit 1.6.



Source: U.S. Bureau of the Census. Social and economic status of the black population in the United States, 1790- 1978. Current Population Reports, P-23, No. 80, p. 116. 1979.

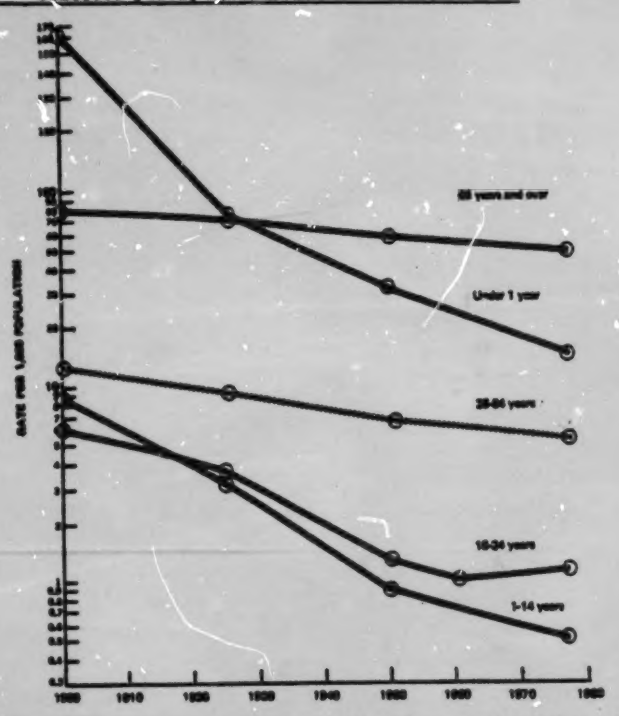
Mortality

The crude death rate from January to October 1979 was 0.86%, a 3.4% decline from the 0.89% rate of 1978. The crude death rate decreased 4% (from 1.0% to 0.96%) among males, and 2.6% (from 0.78% to 0.76%) among females. (The crude death rates for the last 5 years were shown in Exhibit 1.3.)

Death rates by age group continue their general decline (see Exhibit 1.7). The infant mortality rate fell to 1.29 per 100 live births by October 1979. The slight decrease in the death rate from 1978 to 1979 for the 15 to 24 age group ended a trend of slow increase, which had been noticeable since 1960.

Crude death rates were 0.87% for the white population in 1979, compared with 0.78% among nonwhites. Nonwhites, however, have higher age-specific mortality for virtually every age interval. This seeming contradiction has existed since 1970 and is explained by the fact that the nonwhite population has a higher proportion of children and lower proportion of elderly than the white population; i.e., the nonwhite population

Exhibit 1.7. Death rates by age, United States, selected years, 1900 to 1977.



Source: U.S. Public Health Service. Healthy People. The Surgeon General's report on health promotion and disease prevention. DHEW (PHS) Publication No. 79-55071. 1979.

is "younger." Hence, age-adjusted mortality rates are about 0.80% for whites and 1.00% for nonwhites. Prior to 1970, both crude death rates and age-adjusted mortality rates were higher among nonwhites than whites.

The differential between white and nonwhite mortality has been declining throughout the 20th Century. Age-adjusted death rates are now about 25% higher for nonwhites than whites, compared with almost 50% higher in 1940. The disparity in life expectancy at birth between whites and nonwhites was 16 years in 1900, 11 years in 1940, and is about 5 years now. Life expectancy has doubled for nonwhites during this century and has increased by 50% among whites.

Age Composition of the United States

The age composition of the U.S. has been shaped – except in very early years, in which nearly all population change was caused by immigration – primarily by birth and

death rates. Early in the history of the United States, both were extremely high. At least through the 20th Century, however, both have fallen rapidly. Though data are less clear on earlier trends, death rates and birth rates probably fell throughout much of the 19th Century as well.

Birth rates and death rates continue to be the dominant factors affecting the age composition of the United States. The exception to this occurs when ethnic subpopulations are considered, since age compositions for some groups have been affected strongly in recent years by immigration.

The overall age composition of the U.S. in 1900 and 1979 was shown in Exhibit 1.1, using an "age pyramid." The age pyramid shows the percentage of a population that falls within a given age group; subtotals for males and females are shown for each age group. (The heights of the two pyramids reflect the difference between total populations in 1900 and 1979.) The roughly triangular shape in 1900 reflects the high birth and death rates of that period – both of which will tend to mean that a larger percentage of the population is below age 19, and that a smaller percentage is above age 70. The "pyramid" in 1979 is, however, much more nearly rectangular. Longer life spans and lower death rates have given rise to a sizeable population above age 70. Falling birth rates have led to a constriction of the "pyramid" at its base. The slight bulge, shown approaching middle age in the graph for 1979, is the baby boom: the product of very high birth rates following World War II.

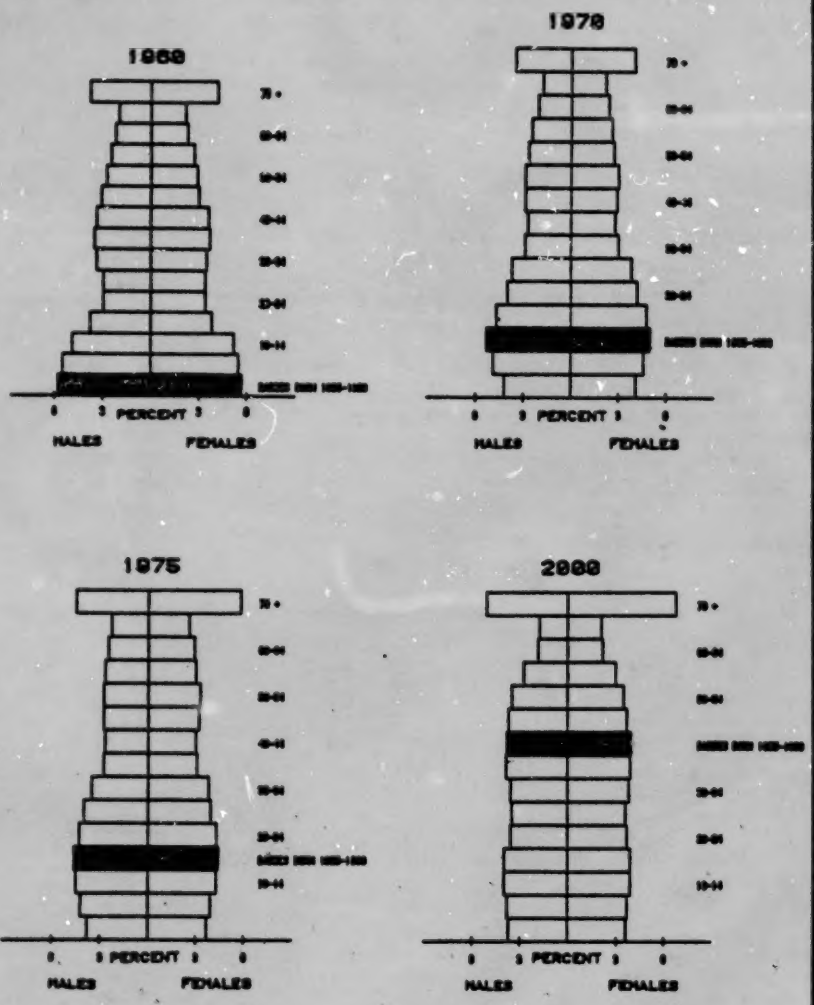
Estimates through the year 2000, shown in Exhibit 1.8, indicate a general continuation of the trend shown in Exhibit 1.1. Note that, for the year 2000, estimates show that the general shape of the pyramid is still rectangular, except that there is a relatively larger percentage of persons in the over age 70 category.

As mentioned earlier, the data in Exhibits 1.1 and 1.8 reflect primarily the birth and death rates for the overall U.S. population and tend to underestimate the effects of immigration for certain ethnic groups. Although data are not uniformly available for these various ethnic groups, and are not always strictly comparable in terms of years in which data were collected or the age groups for which tabulations are presented, the broad effect of immigration is apparent.

The population pyramids for selected ethnic groups, based on the 1970 census data, are shown in Exhibit 1.9. Note that the population pyramids are presented for U.S. born, foreign born persons, and the total U.S. population. Generally, across ethnic groups, persons who were foreign born tended (in 1970) to be older, and closer to middle age than the U.S. born. In part this may reflect persons of childbearing age who enter the U.S. with relatively few children; their children, when born, may contribute to the younger age categories in the pyramids for the U.S. born. However, the specific patterns for each ethnic group depend upon several factors, including how long ago immigration occurred; the relative mix of men, women, children, and ages in the immigrant population.

The age pyramids for U.S. populations show relatively large percentages of persons in the younger age categories, as compared with the overall U.S. population. Because these data are for 1970, they are likely to underestimate changes that have been occurring because of generally falling birth rates. Certainly they do not reflect any changes that have occurred during the 1970s. As Exhibit 1.6 showed, however, fertility rates have been

Exhibit 1.9. Age-sex composition of the U.S. population in the 20th century.



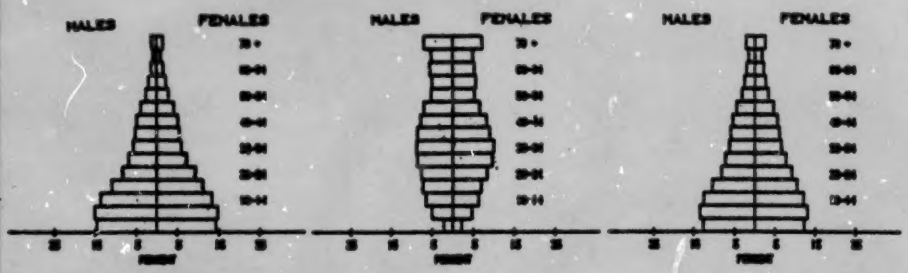
Source: Age structure of the U.S. population in the 20th century. Washington: Population Reference Bureau, Inc. 1978. Used with permission.

falling for black and other races as well as for whites, since about 1960. Thus, part of this trend is reflected in the 1970 data. Certain of the population pyramids for the U.S. born population show a slight constriction at the base of the pyramid, reflecting a percentage decline in the younger age groups.

More recent data are available for persons of Spanish heritage, as shown in Exhibit 1.10. Data are shown for different countries of origin (though separate tabulations are

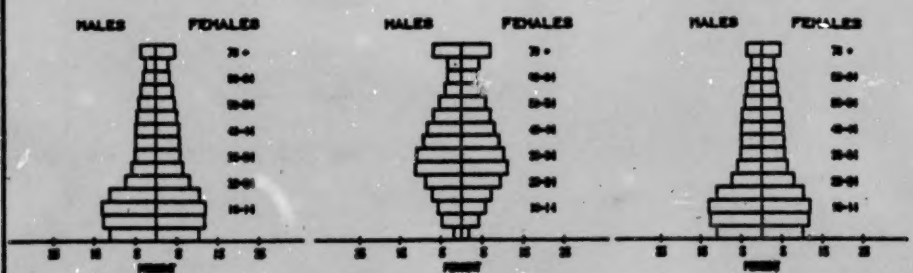
Exhibit 1.9. Age-sex composition of selected U.S. ethnic groups, 1970.

a) Spanish heritage population



	MALES	TOTAL	FEMALES
U. S. BURN			
POPULATION (in 1000)	3,880	7,948	3,848
MEDIAN AGE	17.8	18.8	19.8
FOREIGN BORN			
POPULATION (in 1000)	701	1,454	753
MEDIAN AGE	30.0	30.4	30.9
ALL U.S.			
POPULATION (in 1000)	4,580	9,396	4,816
MEDIAN AGE	20.1	20.7	21.3

b) U.S black population

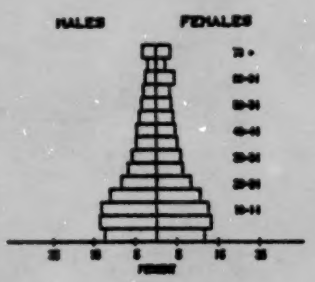


	MALES	TOTAL	FEMALES
U.S. BORN			
POPULATION (in 1000)	10,000	22,000	11,070
MEDIAN AGE	20.0	22.0	23.2
FOREIGN BORN			
POPULATION (in 1000)	118	259	140
MEDIAN AGE	24.4	24.6	26.2
ALL U.S.			
POPULATION (in 1000)	10,722	22,259	11,217
MEDIAN AGE	21.0	22.0	23.7

Source: U.S. Bureau of the Census. Nineteenth census of the United States: population, 1970. Vol. 2. Characteristics of the population. United States summary. Table 190.

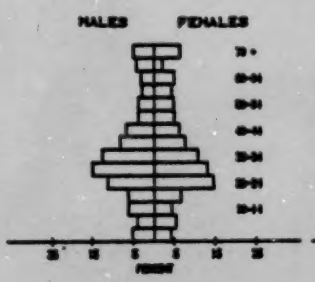
Exhibit 1.9. (cont.)

c) U.S. Indian population



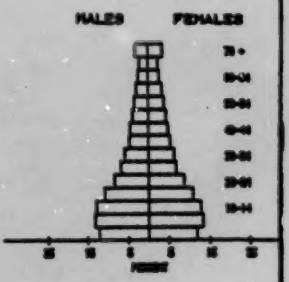
U.S. BORN

MALES	TOTAL	FEMALES
POPULATION (in 1000)		
366	748	382
MEDIAN AGE		
19.6	20.8	22.0



FOREIGN BORN

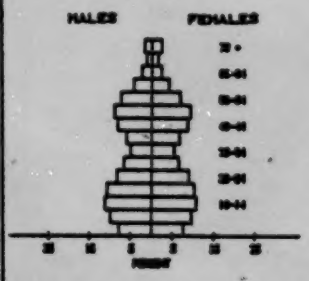
MALES	TOTAL	FEMALES
POPULATION (in 1000)		
7	14	7
MEDIAN AGE		
30.5	30.7	31.0



ALL U.S.

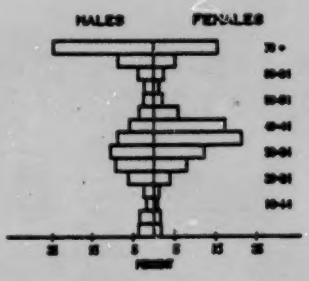
MALES	TOTAL	FEMALES
POPULATION (in 1000)		
374	761	387
MEDIAN AGE		
20.0	20.8	22.0

d) U.S. Japanese



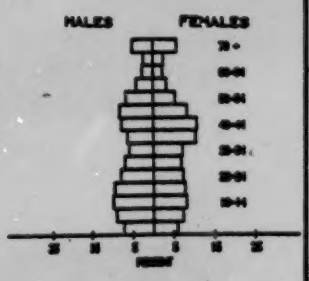
U.S. BORN

MALES	TOTAL	FEMALES
POPULATION (in 1000)		
250	484	236
MEDIAN AGE		
26.0	27.1	27.7



FOREIGN BORN

MALES	TOTAL	FEMALES
POPULATION (in 1000)		
58	120	62
MEDIAN AGE		
41.0	40.1	38.0

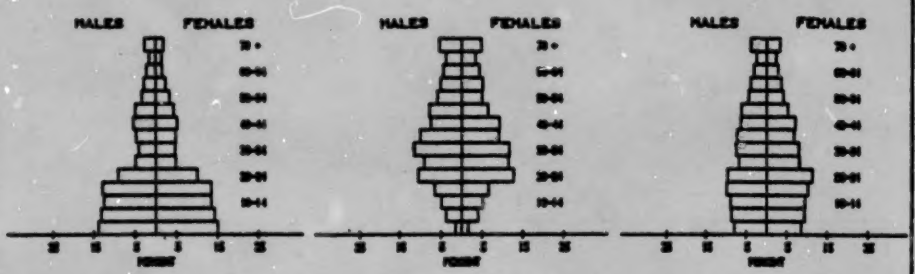


ALL U.S.

MALES	TOTAL	FEMALES
POPULATION (in 1000)		
271	607	318
MEDIAN AGE		
30.5	32.4	34.5

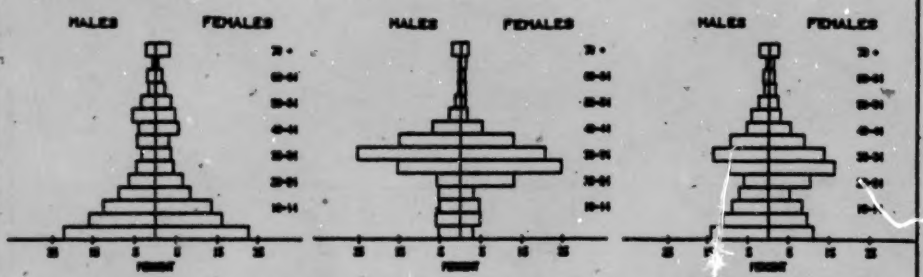
Exhibit 1.9. (cont.)

a) U.S. Chinese population



	U.S. BORN		FOREIGN BORN		ALL U.S.	
MALES	TOTAL	FEMALES	MALES	TOTAL	FEMALES	
POPULATION (= 1000)						
121	229	108	100	204	96	
MEDIAN AGE						
18.0	18.4	17.6	33.6	34.6	33.7	
27.7	28.7	29.8				

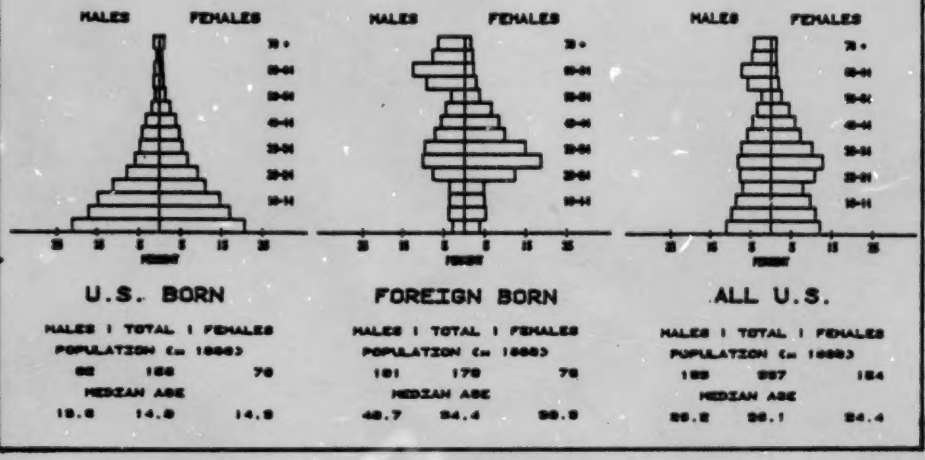
f) U.S. Korean population



	U.S. BORN		FOREIGN BORN		ALL U.S.	
MALES	TOTAL	FEMALES	MALES	TOTAL	FEMALES	
POPULATION (= 1000)						
16	32	17	19	38	20	
MEDIAN AGE						
14.7	14.4	14.1	31.0	30.0	30.9	
25.0	28.4	30.6				

Exhibit 1.9. (cont.)

g) U.S. Filipino population



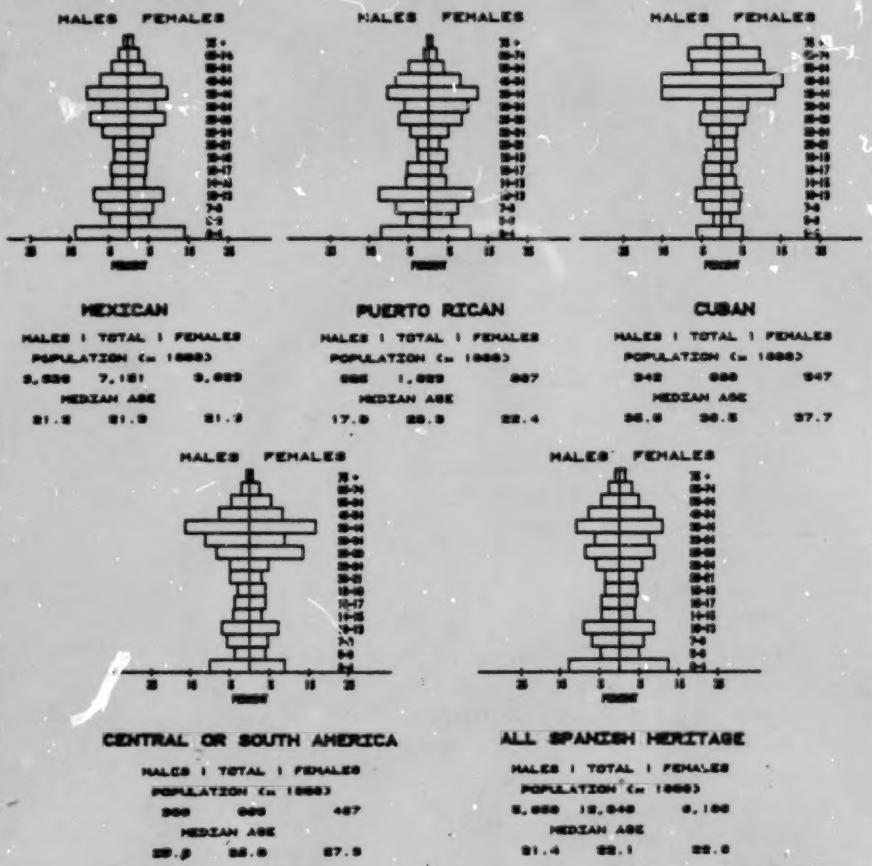
not shown for U.S. born and foreign born). Each of these graphs shows that, regardless of country of origin, there is a bulge in the pyramid occurring in middle age and late middle age, reflecting, in part, earlier trends in immigration among persons of Spanish heritage.

Total numbers of persons of Spanish heritage, in 1978, are shown in Exhibit 1.11. About 59% of the Spanish heritage population is of Mexican origin, about 12% is of Puerto Rican origin, and the remainder are from other countries as listed in Exhibit 1.11.

The contribution of immigration to the overall demographic structure and composition of the U.S. has varied considerably over time. In the very early years of the country, immigration counted for a very large percentage of total population growth. In terms of numbers of immigrants, there were sharp peaks in the mid-1800s and in the early 1900s. Since 1951, about 9.5 million immigrants have entered the U.S. The average annual number has increased during the last 30 years, averaging 250,000 per year in the 1950s, 330,000 per year in the 1960s, and about 400,000 per year during the 1970s. This is about a 60% increase in average annual immigration over 2 decades.

There have been marked changes in the sources of the immigrants. Whites of European origin comprised over 75% of the immigrants during the period from 1930 to 1960. This proportion has declined to less than 25% in the 1970s. Asians and Hispanic peoples, who comprised 20% of the immigrants from 1930 to 1960, accounted for about 75% in the 1970s (Hispanics over 40%, and Asians about one-third). Exhibit 1.12 shows the leading countries of origin of immigrants from 1975 to 1977.

Exhibit 1.10. Age-sex composition of the U.S. population of Spanish heritage, by origin, 1978.



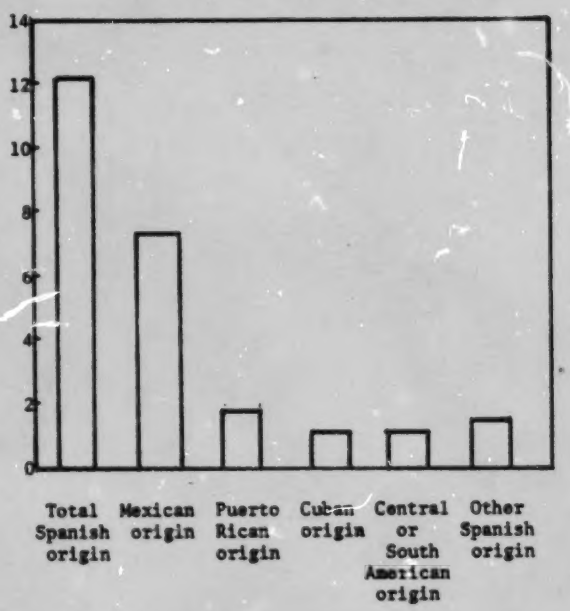
Source: U.S. Bureau of the Census. Persons of Spanish origin in the United States: March 1978. Current Population Reports, P-20, No. 339, pp. 18-19. 1979.

Migration Patterns in the United States

Nonmetropolitan areas continued to grow at a greater relative rate than metropolitan areas, although actual numerical growth was still nearly twice as great in metropolitan areas as nonmetropolitan areas. Central cities have lost population, although metropolitan areas outside the central cities have shown pronounced growth. Inmigration rates of the large metropolitan areas are now half their levels of the 1960s, while inmigration rates of the smaller metropolitan areas have doubled.

Nonmetropolitan growth has been most rapid in counties just outside the metro-

Exhibit 1.11 Number of Persons of Spanish Origin by Type of Spanish Origin: March 1979



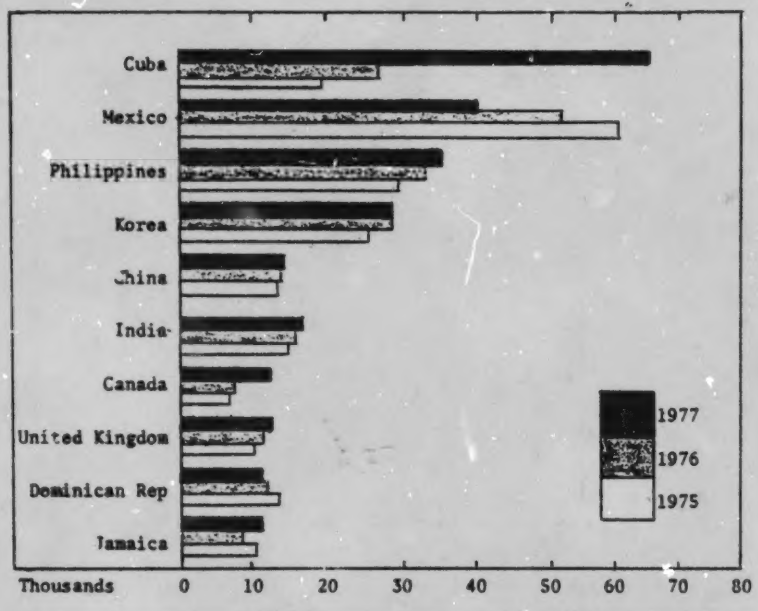
SOURCE: U. S. Bureau of the Census. Persons of Spanish origin in the United States: March 1979 (Advance Report). Current Population Reports, October 1979, Series P-20, No. 347, p. 1.

politan areas, indicating an expanding suburbanization, but more distant counties also are growing rapidly. All categories of nonmetropolitan counties have been growing, in contrast to the trend of the 1960s. The farm population continued to decline at an average annual rate of 2.4% and stood at 8 million in 1978 (3.6% of the U.S. population).

Regional Inmigration and Outmigration. In none of the four major regions of the country do metropolitan areas have net inmigration from nonmetropolitan areas. In the Northeast and North Central regions, metropolitan areas had significant outmigration. For the South and West, the numbers of migrants to and from metropolitan areas were about equal.

From 1975 to 1978, the Northeast and North Central regions had net outmigration of almost 700,000 each, while the "sunbelt" states of the South and West had net inmigration of 1,009,000 and 376,000, respectively. The net outmigration from the Northeast and North Central regions continues a pattern existing a decade earlier. The net inmigration to the South and West continues the pattern from the late 1960s, except that the inmigration to the South now exceeds the inmigration to the West for the first time.

Exhibit 1.12 Immigrants by leading countries of origin, 1975, 1976, and 1977



SOURCE: U. S. Bureau of the Census. Statistical abstract of the United States: 1978 (99th ed.). Washington, D. C., 1978, p. 85.

The net outmigration from metropolitan areas is accounted for entirely by whites. The number of black migrants moving to and from metropolitan areas is now about equal. This represents a change from the 1960s, when metropolitan areas had net inmigration of blacks. In terms of interregional movements, black migration patterns in the 1970s have tended to resemble more closely white patterns than was the case during the 1960s. In the 1960s, the Northeast had net inmigration of blacks and the South had net outmigration of blacks. The pattern was the opposite among whites. In the 1970s, the Northeast had net outmigration of both blacks and whites, and the South had net inmigration of both groups.

The highest mobility rates are shown by people in their 20s (over 60% of whom moved between 1975 and 1978) and their young children — almost half of all children, 3 to 9 years old, moved during the 3-year period. Only about 15% of people over age 55 moved, and mobility rates for persons 30 to 50 years old were intermediate between the young and old groups. About 40% of moves were to a different county, and almost half (48%) of those were to a different state.

From 1975 to 1978, about the same proportion of blacks and whites changed residences (a little over one-third of each), but whites were more likely to move longer distances; i.e., out of the county. Of the whites who moved, 41% moved to a different

county, 23% within the same state, and 18% interstate. Among blacks who moved, 26% moved to a different county, 13% intrastate, and 13% interstate. Almost two-thirds of all residence changes among blacks were within the same standard metropolitan statistical areas (SMSAs), compared with 45% for whites.

Interregional Migration of the Poor. Although the poor are less likely to change residence than people with higher educations and incomes, and are far less likely to make longer distance moves (such as intercounty, interstate, or interregional moves), migration of people below the poverty level has important implications for unemployment and welfare, economic indicators, health care, and a variety of social and economic policy decisions.

The Northeast, which had long been a net recipient of poor migrants, especially from the South, became a net exporter of poverty in the mid-1970s. For example, in the 2-year period from 1975 to 1977, poor outmigrants from the Northeast outnumbered poor inmigrants by 171,000. The North Central region has had net outmigration of the poor since the late 1960s. The West has long been a net recipient of impoverished migrants, and this trend has continued through the 1970s. The South, which had experienced overall net outmigration of all income levels as well as net outmigration of the poor for almost 100 years, shifted to overall net inmigration by the late 1960s (caused especially by net inmigration of nonpoor whites) and to net inmigration of the poor as well by the mid-1970s. The South has changed, therefore, from exporter to importer of poverty during the last decade.

Virtually all of the nation's reduction since 1970 in the number of poor people has occurred in the South, historically the country's poorest region. The number of people below the poverty level in the South decreased by nearly 2 million, from 12.3 million in 1970 to 10.4 million in 1977. In the rest of the U.S., the number was about 14.6 million for both years.

The South continues to have the largest proportion of "home grown" poverty. Sixty-four percent of its poor have never moved out of the state in which they were born. Comparable figures are 56% for the Northeast, 55% for the North Central region, and 31% for the West. Thus, the South, Northeast, and North Central areas do not differ a great deal in the proportion of poor lifetime nonmigrants, but they contrast noticeably with the West, where over two-thirds of the poor are inmigrants.

The South's net inmigration has coincided with its very rapid rise in per capita income from 79% of the national average in 1960, to 86% in 1970, and to about 93% in 1980. The increase has been caused by increased income generating forces in the South, such as industrialization, and to inmigration of nonpoor whites from other regions.

Economic Status

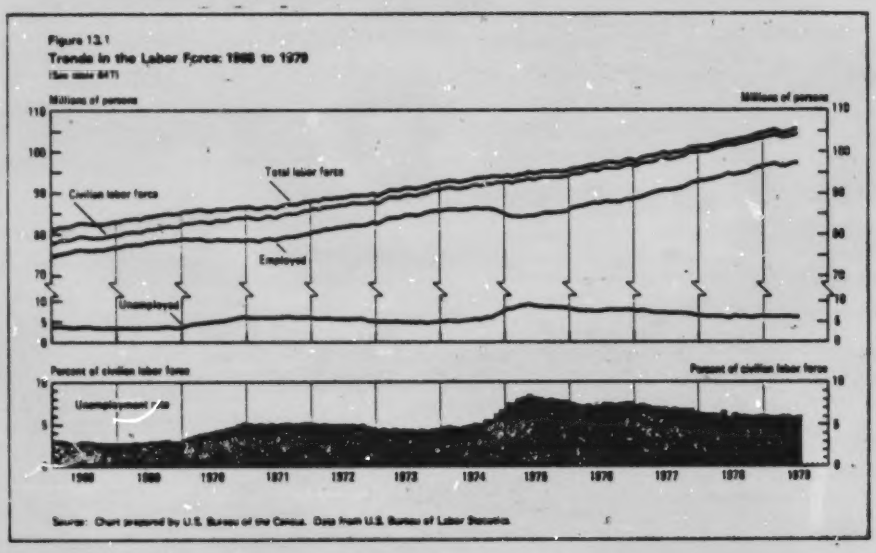
Trends in the Labor Force

Employment growth slowed considerably in 1979, after 3 consecutive years of rapid increases (see Exhibit 1.13). Civilian employment in late 1979 totaled 97.7 million, 2.0

million higher than a year earlier. In contrast, employment had grown by 3.3 million in 1978. The increase in jobholding among women – 1.4 million in 1979 – accounted for most of the 1979 growth in employment. The number of employed adult men rose by about 700,000, about half the group's increase in the previous year.

In contrast to the preceding year, teenagers did not share in the 1979 employment growth. After an advance of 200,000 in 1978, teenage jobholding relatively was unchanged in 1979, in part because the teenage population started to drop off as the "baby boom" generation was moving out of the teen years.

Exhibit 1.13 Trends in the Labor Force: 1968 to 1979



SOURCE: U. S. Bureau of the Census. Statistical abstract of the United States: 1979. (100th edition) Washington, D. C., 1979, p. 388.

The nation's unemployment rate remained at about the late-1978 level throughout 1979 – 5.8% of the total civilian labor force – except for the last quarter of 1979, when the rate rose to 4.9%. This leveling off followed a 3-year decline beginning with a high of 8.5 at the end of the 1974-75 recession (see Exhibit 1.13). The number of unemployed persons, 6.1 million, was up by about 200,000, with adult men and women each representing about 2.3 and 2.2 million of the unemployed, and teenagers representing 1.5 million. Unemployment rates varied from state to state in 1979, ranging from a high of 9.2% in Alaska to a low of 2.8% in Wyoming. States with low unemployment in 1979, as in earlier years, tended to be clustered in the North Central farm belt.

Employment among blacks grew more slowly in 1979 than during each of the previous 2 years. Their over-the-year increase was about 200,000, or 2.2%, compared with approximately 4.5% and 6.0% in 1977 and 1978. Overall, the level of unemployment

among blacks changed little in 1979, remaining about 12.0% to 12.4% for each quarter. Unemployment among black teenagers, 16 to 19 years old, also remained at high levels – 35.5% for men and 39.1% for women. The job situation for persons of Hispanic origin improved slightly in 1979. Employment advanced by 240,000 workers to 4.6 million, while the unemployment rate moved from 9.1% in 1978 to 8.3% in 1979. The unemployment rate for Hispanic teenagers – 19.1% – fell between the corresponding rates for whites and blacks.

Income and Poverty

Median family income in 1978 ($17,640) was 6% higher than the 1970 level ($16,569) after adjusting for inflation (see Exhibits 1.14 and 1.15). This represents an average annual increase since 1970 of 0.8%, which was much less than the average annual increase experienced between 1960 and 1970 (3.0%). The slower growth during the current decade is related, in part, to slower overall economic growth during the 1970s and the severe recession from November 1973 to March 1975.

Over the year 1979, real average weekly earnings were down 5.3%. An 8.0% increase in average hourly earnings was offset by a 0.6% decrease in average weekly hours and by a 13.4% increase in the Consumer Price Index. Over the year 1979, real spendable earnings were also down 5.3%, after adjustments to the progressive nature of the federal income tax system. This means, in brief, that a worker with an 8.0% pay raise over the course of the year still had 5.3% less purchasing power than during the previous year.

White families had a median income of $18,370 in 1978, an increase of 2% above their 1977 median income in real terms. In 1978, median income for black families ($10,880) represented an increase of about 6% above the 1977 median. The median income of Spanish families ($12,570) was not significantly different than their 1977 median in real terms.

For the second year in a row, there was no significant change in the size of the poverty population. In 1978 there were about 24.5 million persons below the poverty level, essentially the same as the 1977 figure of 24.7 million. (Families are classified as being above or below the poverty level according to an index that reflects the different consumption requirements of families based on their size and composition, sex and age of family head, and farm-nonfarm residence. In practice, the poverty level for a given family is approximately three times the cost of the members' economical food purchases. In 1978, the poverty threshold for a nonfarm family of four was $6,662, about 7.6% higher than the comparable 1977 cutoff of $6,191.)

Overall, about 11.4% of the U.S. population was below the poverty level in 1978; however, rates varied widely among the various subgroups. For example, the poverty rate in 1978 for white families (6.9%) was much lower than the rates for black families (27.5%) and for families of Hispanic origin (20.4%). Families maintained by women with no husband present had a poverty rate of 31.4%, far higher than those of husband-wife families or families with a male householder and no wife present (5.2% and 9.2%, respectively).

Exhibit 1.14 Median Family Income in 1960 and 1970 to 1978 in Current and Constant Dollars, and Percent Change

Year	Median family income	
	In current dollars	In 1978 dollars
1978	$17,640	$17,640
1977	16,009	17,226
1976	14,958	17,134
1975	13,719	16,621
1974[r]	12,902	17,060
1974	12,836	16,973
1973	12,051	17,683
1972	11,116	17,326
1971	10,285	16,559
1970	9,867	16,569
1960	5,620	12,374

Year	Median family income	
	In current dollars	In 1978 dollars
PERCENT CHANGE		
1970 to 1978	*78.8	*6.5
1977 to 1978	*10.2	*2.4
1976 to 1977	*7.0	0.5
1975 to 1976	*9.0	*3.1
1974[r] to 1975	*6.3	*-2.6
1973 to 1974	*6.5	*-4.0
1972 to 1973	*8.4	*2.1
1971 to 1972	*8.1	*4.6
1970 to 1971	*4.2	-0.1
1960 to 1970	*75.6	*33.9
ANNUAL AVERAGE PERCENT CHANGE		
1970 to 1978	*7.5	*0.8
1960 to 1970	*5.8	*3.0

[r]Based on revised methodology.

*Significant at the 95-percent confidence level.

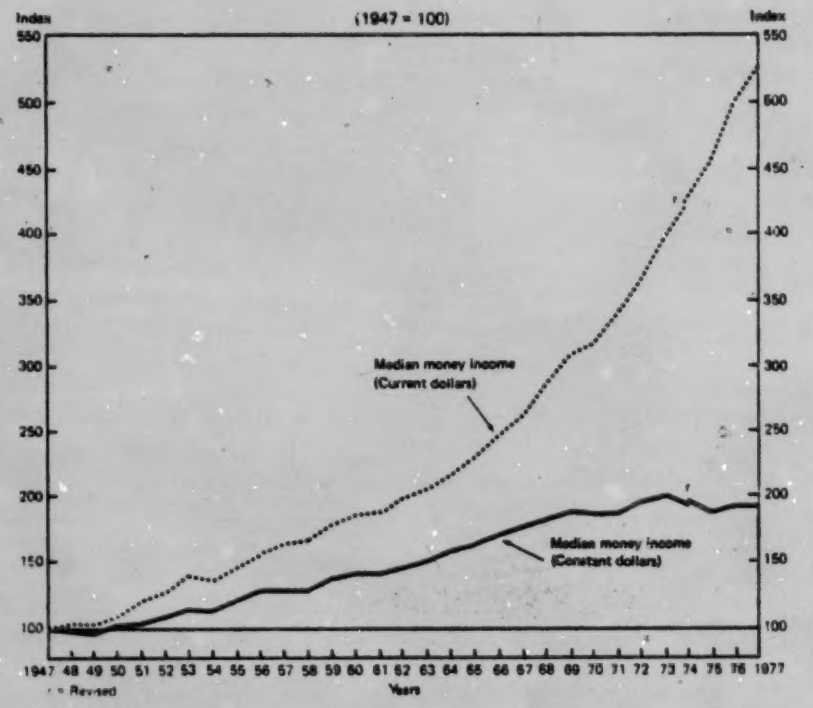
SOURCE: U. S. Bureau of the Census. Money income and poverty status of families and persons in the United States: 1978 (Advance Report). Current Population Reports, November 1979, Series P-60, No. 120, p.2.

About three-fifths of all poor persons in 1978 lived in metropolitan areas. About 42% of the poor in 1978 lived in the South Region, compared with 32% of the population.

Housing and Neighborhoods

The Size and Quality of Existing Housing. The Housing Act of 1949, which established the national housing goal of "a decent home and a suitable living environment," did not spell out the meaning of either "decent home" or "suitable living environment"; nor has subsequent legislation provided a definition. Because housing quality is difficult to define precisely, progress toward meeting these goals has been difficult to measure. However, all available evidence shows continuing and steady improvement in the quality of housing to the point at which the kinds of inadequacies (e.g., lack of plumbing, dilapidated housing, or housing needing major repairs), which caused the greatest concern in 1949, virtually have been eliminated for most of the nation's population. This improve-

Exhibit 1.15 Index of Median Family Income in Current and Constant Dollars: 1947 to 1977



SOURCE: U. S. Bureau of the Census. Money income in 1977 of families and persons in the United States. Current Population Reports, March 1979, Series P-60, No. 118, cover.

ment in quality has been aided by the fact that housing availability kept pace with the growth in population and the formation of families and other households. As good quality new housing was added, it was possible to remove poor quality older housing or to renovate older units to meet current standards.

The improvement in quality that has occurred should not be surprising. Despite several recessions and a few periods of inflation, the years since World War II generally have shown steady economic progress and improvements in the standard of living for nearly all American families. For low income families, part of the increase in the standard of living has taken the form of improved housing, which has meant that they have moved out of small, inadequate units into larger, better homes and apartments. Relatively few — under 2 million or less than 3% of all households — now live in housing that lacks complete plumbing; the same is true of households in dilapidated housing, although this standard is more difficult to measure.

At the same time, however, that housing conditions have improved, so have public aspirations for better housing. For example, the typical new home of the late 1940s had about as much floor space as the typical new mobile home of 1977, and half as much as the typical new home of today. At the same time that housing unit sizes have been increasing, the average size of households has been decreasing, from 3.7 persons in 1940 to 2.8 persons per average household in 1978. These trends, together with improved equipment and more built-in amenities, have accompanied rising community expectations about acceptable housing.

Housing Inventory Changes. By November 1976, the nation's housing had grown to a total of 80.9 million units, an increase of 1.8 million units and 2.3% from November 1975. About 98%, or 79.3 million units, were intended for year-round use. The total vacancy rate for year-round units was 6.7%. Occupied units increased by 1.5 million from 1975 to 1976, to 74.0 million units. Owner occupied units increased by just over 1.0 million to 47.9 million, and renter occupied units increased by over 0.4 million to 26.1 million. In 1976, owner occupied units accounted for over 64.7% of all occupied units, up from 64.6% in 1975.

From 1970 to 1976, one-family units increased at a slower rate than housing as a whole, and fell from 69.1% of all units in 1970 to 67.6% in 1976. Units in two- to four-unit structures declined from 13.3% to 12.8% of the total over the same period. Units in structures with five or more units and mobile homes increased their share; apartments rose from 14.5% to 15.0%, and mobile homes rose from 3.1% to 4.6%.

Neighborhood Quality. Neighborhood quality is a relatively new concept and has been included more recently in the Annual Housing Survey of the Department of Commerce. The growing concern of American citizens for quality of life is reflected in the indicators of neighborhood quality that are seen as important to enhancing or improving quality of life. The indicators, traced from 1973 through 1976, include neighborhood condition, inadequate services, and opinions of neighborhood. Exhibit 1.16 presents these selected indicators. They may not describe comprehensively, sharply, or objectively the actual conditions in neighborhoods, but they do represent the feelings and opinions of people about their living environment.

These neighborhood indicators do not show the same general trend of improvement that was found in the housing quality indicators. In almost every case, the situation is worse than in 1973, and in most cases, there has been further deterioration from 1975 to 1976. The neighborhood setting of housing units clearly is a subject that requires more thought and analysis to understand the needs and to determine whether public policy can be used to bring about improvement.

Travel to School and Work

The yellow school bus is the chief means of transportation to school for elementary and secondary school students, followed by walking and private automobiles. In 1978, school buses were used to transport about 20 million or 40% of the 49 million students to and from school. By contrast, only 7% of public school students were estimated to have

Exhibit 1.16 Selected Indicators of Neighborhood Quality--Percent of Occupants Reporting Specified Indicator

	1973	1974	1975	1976
Neighborhood Conditions				
Airplane Noise	)45.8%	)49.3%	16.5%	17.8%
Street Noise	)	)	34.8	34.9
Heavy Traffic	30.0	31.5	30.3	30.5
Streets Need Repair	14.1	19.4	17.2	17.6
Inadequate Street Lights	20.0	20.2	25.1	24.4
Crime	13.2	17.2	18.5	17.8
Odors	11.6	10.3	8.9	9.5
Litter	11.4	14.6	14.4	15.4
Commercial or Industrial Uses	13.5	16.6	17.1	20.4
Deteriorating Housing	8.7	10.1	9.5	10.0
Abandoned Buildings	5.8	6.8	6.9	7.1
Inadequate Services				
Public Transportation	36.1	34.6	42.0	40.1
Shopping	13.3	13.2	14.6	14.1
Schools	3.6	4.0	3.8	4.2
Police Protection	8.4	9.3	8.8	9.3
Fire Protection	4.3	4.8	5.2	5.5
Hospitals or Health Clinics	11.8	12.5	13.1	13.5
Opinion of Neighborhood				
Fair	16.7	15.0	14.9	15.3
Poor	3.0	2.8	2.4	2.6
Poor and Want to Move	2.2	2.0	1.7	1.8
Want to Move Regardless of Opinion	12.6	12.5	11.1	11.4

SOURCE: U. S. Department of Housing and Urban Development. The tenth annual report on the national housing goal. HUD-PDR-379(2), September 1979. P. 64.

been transported to school at public expense 50 years ago. Also in 1978, another 14 million students — one-third of elementary pupils and one-fifth of those in high school — walked to school, while nearly 12 million either drove or were taken in private cars; 1.6 million used public buses; and 715,000 either rode bikes or used some other means.

Generally, students live close to school. Nearly one-third of all students live within a mile, and about one-half of them take less than 15 minutes to make the trip. Only 12% live 10 miles or farther and about 7% spend 45 minutes or more getting to school. Black children made up 15% of the elementary school population in 1978 but comprised 35% of all elementary students riding public buses to school, 20% of those walking, and 13% of those riding a school bus.

Contrary to the common notion of commuters pouring out of suburban residential areas each day onto jammed streets and expressways en route to downtown workplaces, workers who both lived and worked in the suburbs actually made up the largest group of commuters within U.S. SMSAs in 1975. Such workers numbered approximately 19,300,000, about twice the 9,600,000 persons who traveled from the suburbs into

central cities to work. Most workers who lived in central cities also worked in central cities (79% of all workers residing in central cities), although about 4 million workers living in central cities (19%) traveled out to suburban jobs.

Nearly 85% of all workers in the U.S. traveled to work in an automobile or truck in 1975 (see Exhibit 1.17). About 65% drove alone and 19% were members of carpools. Another 6% used public transportation to get to work, 5% walked to work, and 3% worked at home. Bicycle and motorcycle riders combined accounted for about 1% of all commuters. The average commuting trip from home to work in 1975 was 9 miles. Workers living in suburban areas took an average of 22 minutes to get to work, compared with 21 minutes for central city residents. Black workers were more likely to use carpools or public transportation to get to work, and less likely to drive alone to work than white workers. About 16% of all black workers in the U.S. used public transportation compared with 5% of all white workers.

Exhibit 1.17 Principal Means of Transportation to Work

(For the United States: 1975. Workers 14 years old and over. Number of workers in thousands.)

Means of transportation	Number	Percent
All workers.....	80,125	100.0
Automobile or truck.....	67,869	84.7
Drive alone	52,294	65.3
Automobile.....	44,830	56.0
Truck.....	7,464	9.3
Carpool.....	15,575	19.4
Automobile.....	13,828	17.3
Truck.....	1,747	2.2
Public transportation....	4,825	6.0
Bus or streetcar.....	3,100	3.9
Subway or elevated.....	1,179	1.5
Railroad.....	405	0.5
Taxicab.....	141	0.2
Bicycle.....	471	0.6
Motorcycle.....	297	0.4
Walk only.....	3,778	4.7
Other means.....	299	0.4
Work at home	2,585	3.2

SOURCE: U. S. Bureau of the Census. The journey to work in the United States: 1975. Special Studies, P-23, No. 99, July 1979, p. 4.

Total U.S. spending to own and operate cars and trucks soared 17.7% to $442.6 billion in 1978, a record $66 billion increase over 1977 outlays, according to The Hertz

Corporation's annual study of motor vehicle costs and use. Three-fourths of the increase – $47.5 billion – went to higher expenses for nearly all elements of driving, including vehicle purchase prices, insurance premiums, interest payments, fuel costs, and maintenance charges. The remaining $19.1 billion of the 1978 vehicle cost rise stemmed from a 4.4% increase in the number of cars and trucks on U.S. roads to a new high of 150.1 million units, up from 143.8 million in 1977.

BIBLIOGRAPHY

Biggar, J. The sunning of America: Migration to the sunbelt. *Population Bulletin,* March 1979, 34(1).

Bouvier, L., et al. International migration: Yesterday, today, and tomorrow. *Population Bulletin,* September 1977, 32(4).

Challenges of the '80s. *U.S. News and World Report,* October 15, 1979, 87(16), 45-80.

Chen, M. The gross national health product: A proposed population health index. *Public Health Reports,* 1979, 94, 119-123.

Flanagan, W.G. Computing real costs of owning a new car: No wonder people coddle so many clunkers. *Wall Street Journal,* February 11, 1980.

Glick, P., & Norton, A. Marrying, divorcing, and living together in the U.S. today. *Population Bulletin,* February 1979, 32(5).

Guzzardi, W. Demography's good news for the eighties. *Fortune,* November 5, 1979, 100, 92-106.

Hertz Corporation. *Nation's spending to own, run cars and trucks up nearly 18% in 1978.* News release, Public Affairs Department, New York, June 25, 1979.

Leon, C.B., & Rones, P.L. Employment and unemployment during 1979: An Analysis, February 1980. (Preprint to be published in *Monthly Labor Review,* U.S. Department of Labor, Bureau of Labor Statistics publication.)

Long, L.H. Interregional migration of the poor: Some recent changes. *Current Population Reports,* 1978, Series P-23, No. 73. (U.S. Bureau of the Census publication)

Long, L., & Hansen, K. Reasons for interstate migration: Jobs, retirement, climate, and other influences. *Current Population Reports,* 1979, Series P-23, No. 81. (U.S. Bureau of the Census publication)

National Center for Health Statistics. Health characteristics of minority groups, United States, 1976. *Advance Data,* No. 27. Hyattsville, Maryland: DHEW Publication No. (PHS) 80-1250.

_____. Annual summary for the United States, 1978: Births, deaths, marriages, and divorces. *Monthly Vital Statistics Report,* 1979, 27(13). Hyattsville, Maryland: DHEW Publication No. (PHS) 79-1120.

_____. Births, marriages, divorces, and deaths for October 1979. *Monthly Vital Statistics Report,* January 1980, 20(10). Hyattsville, Maryland: DHEW Publication No. (PHS) 80-1120. (These publications are available from: National Center for Health Statistics, STIB Room 1-57, Center Building, 3700 East West Highway, Hyattsville, Maryland 20782.)

Omran, A.R. Epidemiologic transition in the United States: The health factor in population change. *Population Bulletin,* May 1977, 32(2).

U.S. Bureau of the Census. *Facts of life and death.* Washington, D.C.: DHEW Publication No. (PHS) 79-1222, 1978.

_____. Geographical mobility: March 1975 to March 1978. *Current Population Reports,* 1978, Series P-20, No. 331.

_____. Money income in 1977 of households in the United States. *Current Population Reports,* 1978, Series P-60, No. 117.

_____. *Statistical abstract of the United States: 1978* (99th ed.). Washington, D.C.,

1978. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 003-024-01647-6 (cloth); or Stock No. 003-024-01647-8 (paper).

_____. *Statistical abstract of the United States: 1979* (100th ed.). Washington, D.C., 1979. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 003-024-02129-3 (cloth); or Stock No. 003-024-02130-7 (paper).

_____. Money income in 1977 of families and persons in the United States. *Current Population Reports,* March 1979, Series P-60, No. 118.

_____. The journey to work in the United States: 1975. Special Studies. *Current Population Reports,* July 1979, Series P-23, No. 99.

_____. Travel to school: October 1978. *Current Population Reports,* September 1979, Series P-20, No. 342.

_____. Money income and poverty status of families and persons in the United States: 1978 (Advance Report). *Current Population Reports,* November 1979, Series P-60, No. 120.

_____. Estimates of the population of the United States and components of change: 1940 to 1978. *Current Population Reports,* 1979, Series P-25, No. 802.

_____. Estimates of the population of the United States by age, sex, and race: 1976 to 1978. *Current Population Reports,* 1979, Series P-25, No. 800.

_____. Persons of Spanish origin in the United States: March 1978. *Current Population Reports,* 1979, Series P-20, No. 339.

_____. Population profile of the United States: 1978. *Current Population Reports,* 1979, Series P-20, No. 336.

_____. Social and economic status of the black population in the United States: 1790-1978. *Current Population Reports,* 1979, Series P-23, No. 80.

U.S. Bureau of Labor Statistics. *State unemployment rates during 1979.* U.S. Department of Labor News Release No. USDL 80-26, January 18, 1980.

U.S. Department of Energy. *Weekly petroleum status report.* DOE/EIA-0208(80-11), March 14, 1980.

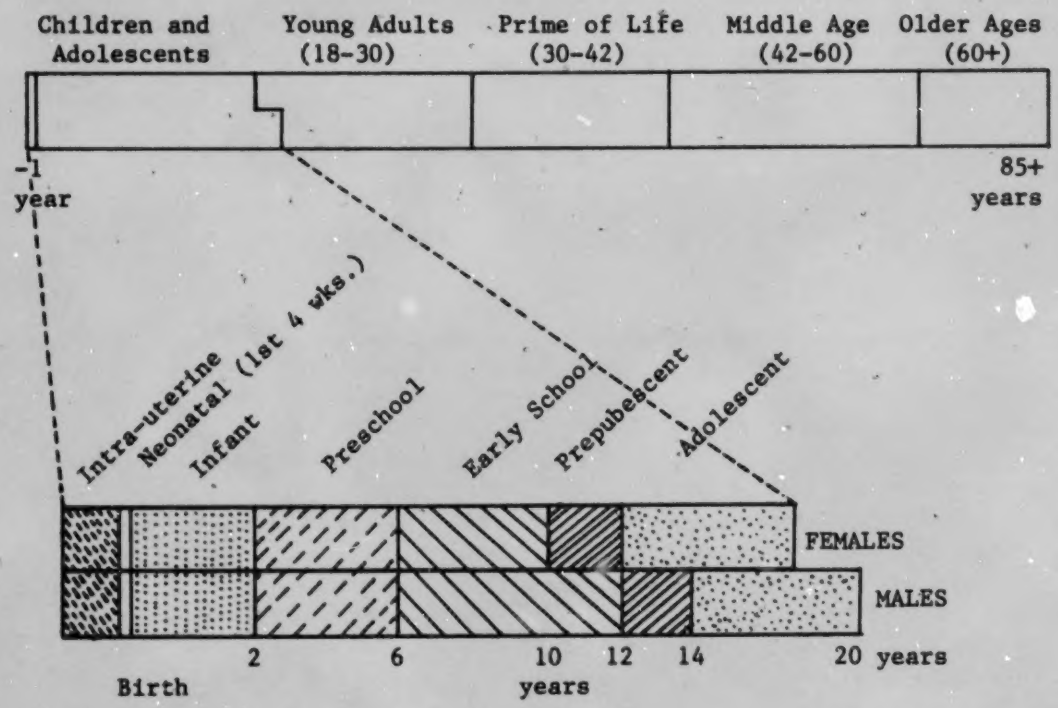
U.S. Department of Housing and Urban Development. *The tenth annual report on the national housing goal.* HUD-PDR-379(2), September 1979.

U.S. Public Health Service. *Healthy people: The Surgeon General's report on health promotion and disease prevention.* Washington, D.C.: U.S. Department of Health, Education, and Welfare, DHEW Publication No. (PHS) 79-55071, 1979.

CHAPTER 2

LIFE CYCLE DEVELOPMENT

Exhibit 2.1. The Life Cycle



Source: McHale, Magda Cordell and McHale, John, with Streatfield, Guy F., "World of Children," Population Bulletin, Vol.33, No.6 (Population Reference Bureau,Inc., Washington, D.C., 1979).

Introduction

Life is a constantly evolving process that begins with conception and continues until death. Movement through time necessitates change and therefore is synonymous with life itself; the opposite state is stasis and death. A state of continuity is necessary also for the life processes to continue over time. Continuity factors serve as linking agents from one stage of development to the next.

With the passage of time, the human organism grows from a single cell to a fully developed adult. The various stages of the growth process make specific functions and social roles possible. Roles such as parent and grandparent are clearly dictated by the aging process. Biological and social growth, therefore, are interrelated, with one depending on the other.

Environmental factors influence human growth and development by providing the necessary elements that are vital to life. These include shelter, food, and oxygen. The environment is also in a state of changing conditions with elements of consistency present.

Thus, life, in all its various forms and stages, is synonymous with change. At the same time, life has elements of continuity that allow change to occur and life to go on.

Intrauterine Development

Fetal Growth and Development

Life begins when a male sperm unites with a female egg. The new life created by this union starts as a single cell and continues to develop for about 266 days, when the fetus weighs around 7 pounds and is capable of surviving independently from the support and protection of the mother's body.

In relation to the total life span of the individual, the early developmental years are short and serve as the foundation for the remainder of one's life span (see Exhibit 2.1). The needs of a child in the support of this growth and development begin before birth and continue throughout the growth years until maturity is reached.

During the developmental process, the most obvious characteristic is that growth proceeds from head to foot. The head is relatively large in size in proportion to other body parts during the prenatal period and during the early years of life. Progressive changes in body proportions occur until maturity is reached in the early 20s (see Exhibit 2.2).

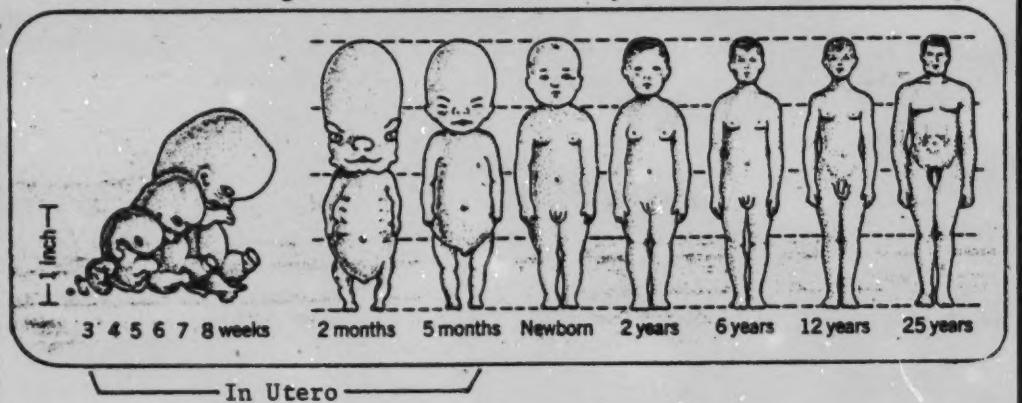
Family Growth and Development

The stage of the family's life cycle in which the developing fetus grows influences the emotional, physical, and economic resources that will be available for supporting and protecting the growing child.

With the advent of the child, the couple moves from the establishment phase of the relationship into the reproductive phase. This period lasts from first gestation until the birth of the last child.

Since 1950, the reproductive phase of couples' lives has been changing. In addition to having fewer children, women have been having their first child at a later age. From

Exhibit 2.2. Changes in the Form and Proportion of the Human Body



Source: Rugh, Roberts and Shettles, Landrum B. From Conception to Birth: The Drama of Life's Beginnings. New York: Harper & Row, 1971; and Robbins, W.J. et al., Growth. New Haven: Yale University Press, 1928.

1972 to 1976, rates of firstborns increased for women 25 to 29 and 30 to 34 years of age and decreased for women 20 to 24 years of age.

Preparation for the birth of a child is usually a time of mutual anticipation and satisfaction for the expectant parents. This is true especially with the trend toward increased participation of both parents in the labor and delivery experience. Expectant parents also anticipate the adjustments that will be placed on their relationship as well as on their social and economic status.

During this period of anticipation and change, grandparents are usually physically and socially self-sufficient. They are also likely to be at their highest earning capacity and have fewer demands on their resources and time. Thus, they are potential resources for financial and child care support.

Factors Affecting Growth and Development

Many maternal factors reflect the health and well-being of the growing fetus: prenatal care, nutrition, age, drugs and chemicals, stress, and infectious and chronic diseases. The physical and emotional state of the mother during pregnancy has a direct influence on the fetus. During this period, the growing fetus is dependent totally on the mother for food, oxygen, and the disposal of waste products.

Maternal Emotional Status. The emotional state of the mother influences the fetus by the hormones she secretes. These hormones pass through the placenta to the fetus. Low birthweight, hyperactivity, and feeding problems may result from these hormonal influences.

Maternal Prenatal Care. Given no prenatal care, an expectant mother is three times as likely to have a low birthweight child. Women, who are least likely to receive adequate prenatal care, are those most likely to have other risk factors working against them.

Maternity and Infant Care Projects, of the Office of Maternal and Child Health, Department of Health, Education, and Welfare, provide money to states to reduce infant and maternal mortality and birth defects. Services from these projects are aimed at low-income women who deliver with little or no prenatal care.

Maternal Nutrition. Maternal nutrition is another critical factor that influences infant health. Exhibit 2.3 lists the recommended daily dietary allowances for non-pregnant, pregnant, and lactating women. Pregnant women lacking proper nutrition have a greater chance of bearing a low birthweight or a stillborn infant. It is estimated that one-half (urban white) to two-thirds (urban black, rural white) of pregnant women in poverty are malnourished.

The special supplemental Food Program for Women, Infants, and Children (WIC) assists pregnant, breastfeeding, and postpartum women who are at nutritional risk because of inadequate incomes and inadequate nutrition. WIC funds are used to provide specified supplemental foods and nutrition education to these women.

Generally, drug addicted and alcoholic mothers also are undernourished and in poor health. Their babies tend to be born developmentally disadvantaged.

Maternal Age. Maternal age is another important factor that influences infant health. Between ages 21 and 30, a woman has the best chances of producing a healthy child and may expect fewer problems during pregnancy and delivery. Infants born to mothers, ages 35 and older, have greater risks of birth defects, while infants born to teenage mothers are twice as likely to be of low birthweight.

Infancy: First Two Years

Birth

Since the late '50s and early '60s, the birth rate for most races has been declining steadily (see Exhibit 2.4). The time of birth marks a transition for the child from total biological dependence on the mother to total dependence for care outside the mother's body. The birth of the first child usually takes place about 1.3 to 2.1 years after marriage.

Neonatal Period

The neonatal period, which encompasses the first month of life, is associated with crying, sleeping, and feeding activities and is accompanied by the infant's vociferous demands for attention and care.

Exhibit 2.3. Recommended Daily Dietary Allowances (for women aged 23 to 50 years, 58 kg. weight and 162 cm. height).

Item	Nonpregnant	Pregnant	Lactation
Protein(g)	44	74	64
Vitamin A(mg.R.E.)	800	1000	1200
Vitamin D(mg.)	5	10	10
Vitamin E(mg.α T.E.)	8	10	11
Vitamin C(mg.)	60	80	100
Thiamin(mg.)	1.0	1.4	1.5
Riboflavin(mg.)	1.2	1.5	1.7
Niacin(mg.N.E.)	13	15	18
Vitamin B_6(mg.)	2.0	2.6	2.5
Folacin(mg.)	400	800	500
Vitamin B_{12}(mg.)	3.0	4.0	4.0
Calcium(mg.)	800	1200	1200
Phosphorus(mg.)	800	1200	1200
Magnesium(mg.)	300	450	450
Iron(mg.)	18	*	*
Zinc(mg.)	15	20	25
Iodine(mg.)	150	175	200

* The increased requirement during pregnancy cannot be met by the iron content of habitual American diets nor by the existing iron stores of many women; therefore the use of 30-60mg. of supplemental iron is recommended. Iron needs during lactation are not substantially different from those of nonpregnant women, but continued supplementation of the mother for two to three months after parturition is advisable in order to replenish stores depleted by pregnancy.

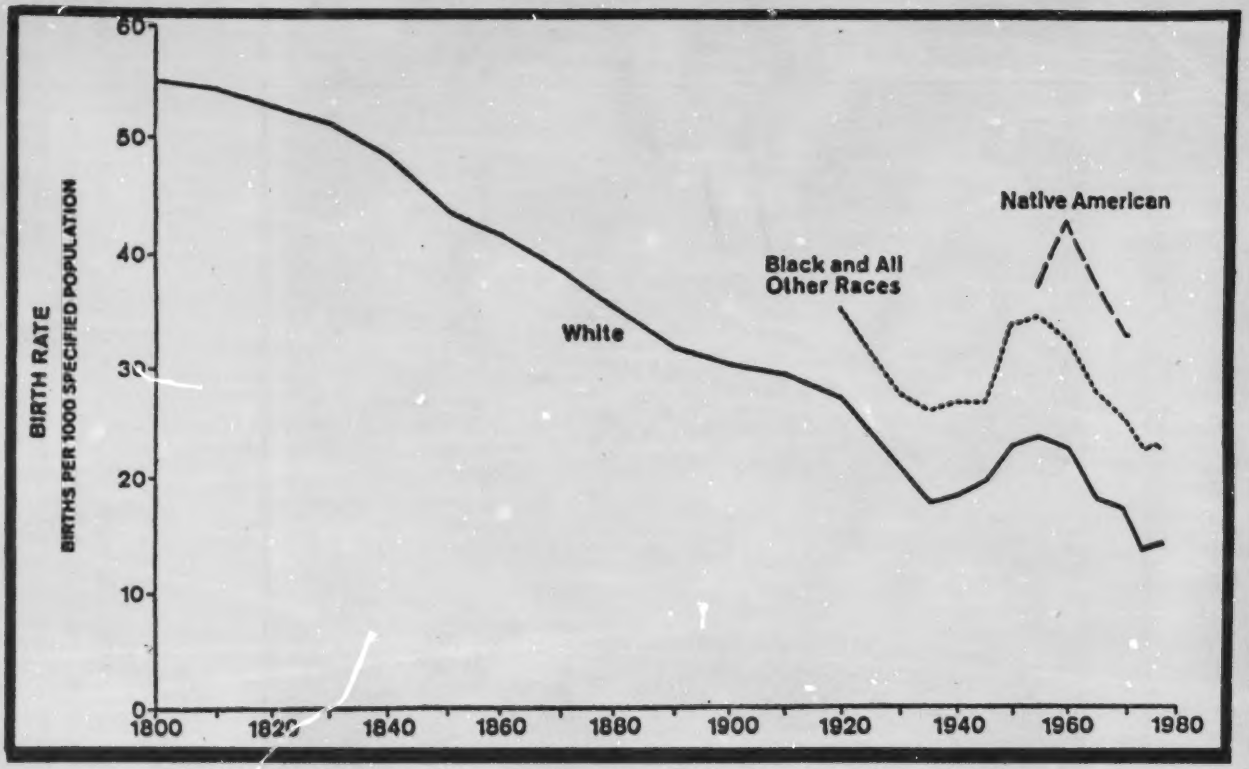
Source: Reproduced from Recommended Dietary Allowances, Ninth Edition (in press), with permission of the National Academy of Sciences, Washington, D.C.,1979.

Growth and Development

During the first 2 years, huge gains are made in motor, intellectual, and language abilities. Of all these gains, sensorimotor processes largely dominate growth. Influencing these developments are heredity and environmental factors such as race, sex, income, and nutrition.

Maturational status affects the timing of motor development, which progresses in a preordained sequence. Individual differences influence the rates at which individuals achieve motor skills. In general, large-muscle control precedes fine-muscle control. Control of the head and neck muscles develops before control of the muscles to lower body

Exhibit 2.4. U.S. birth rates by race, 1800 to 1979.



Source: Snapper, Kurt J. "The American Legacy." In: Grotberg, Edith H., ed. 200 Years of Children. Washington: U.S. Department of Health, Education, and Welfare, Office of Child Development, 1976. (DHEW Publication No. (OHD) 77-30103) pp. 13-38.

Exhibit 2.5. The Sequence of Motor Development: The Ages at Which the Average Infant Achieves a Given Behavior

Source: Shirley, M.M. The First Two Years. Child Welfare Monograph No. 7, University of Minnesota Press, Minneapolis, 1931.

parts (see Exhibit 2.5). During this time, the infant also begins to develop skills in social interaction. Language is a primary tool in this process.

Family Growth and Development

When the infant is born, the couple moves into the parental role, in which the protection, care, and nurturing of the child become the major foci. These activities place heavy financial demands on the couple and limit social and personal time. These demands occur at a time when financial resources are lowest and professional and social demands are highest. At the same time, the couple enjoys the healthiest and most energetic level in the life cycle.

Grandparents adjust to the formation of a new family unit as an extension of their own original family. During this period, grandparents must accept the independence of their children and respect the decisions they make as new parents.

Infant Mortality

The first years of life pose health hazards for the infant, although life has been made safer for babies in recent years. In 1977 a record low of 14 infant deaths per 1,000 live births was achieved – a 7% decrease from the previous year. Yet, despite the progress, the first year of life remains the most hazardous period until age 65. Black infants are nearly twice as likely as white infants to die before their first birthdays.

The two principal threats to infant survival and good health are low birthweight and congenital disorders, including birth defects (see Exhibit 2.6).

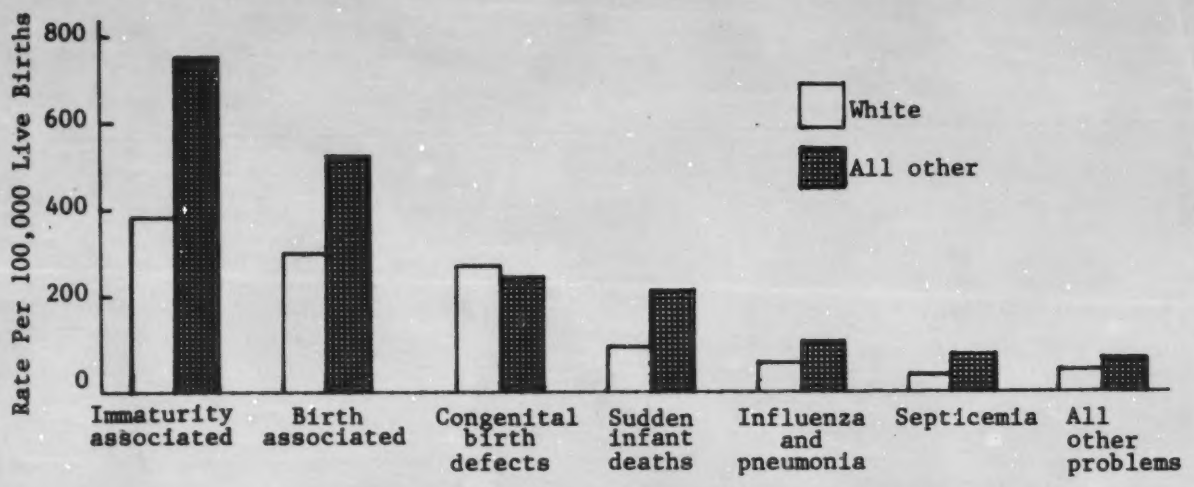
Sudden Infant Death Syndrome. During the first year of life, a major cause of infant mortality is the sudden and unexpected death of apparently thriving infants. These deaths are characterized by two features – age and sleep. Sudden Infant Death Syndrome (SIDS) is associated with a sleeping child and usually occurs during the first through fourth months of life. This condition accounts for more than half of all infant deaths, causing nearly 10,000 deaths annually in the United States. The cause of SIDS presently is unknown.

The Sudden Infant Death Syndrome Information and Counseling Program collects and furnishes information and counseling to families affected by this syndrome. Research on this problem also is conducted through the Institute of Child Health and Human Development.

Factors Affecting Growth and Development

Childhood Diseases. Another vital element that influences infant health is the pre-

Exhibit 2.6. Major Causes of Infant Mortality: United States, 1976



Source: Healthy People. U.S. Department of Health, Education, and Welfare, Public Health Service. Washington, D.C.: Government Printing Office, 1979.

vention of childhood diseases such as measles, polio, rubella (German measles), mumps, diphtheria, pertussis (whooping cough), and tetanus.

Immunizations. In 1977, of the 52 million children in the United States under age 15, more than 20 million had not been immunized against one or more of the childhood diseases. In general, white children more often were protected from these diseases than were children of all other races.

The Center for Disease Control (CDC) assists states with immunization programs by providing funds for the purchase of vaccines. Exhibit 2.7 lists the recommended immunization schedule for children.

Child Abuse and Neglect

A major problem area for many growing children is abuse and neglect. More than 1 million American children suffer neglect or physical abuse each year, according to the National Center on Child Abuse and Neglect. At least one in five dies from mistreatment.

In the early 1960s, state legislatures began introducing reporting laws on child abuse and neglect. The most active legislation action on child abuse has occurred in the past 15 years. Additionally, categories of persons who may report abuse have been expanded, and the concept of reportable abuse and neglect has been broadened. The extension of im-

Exhibit 2.7. Schedule For Childhood Immunization

Age[1]	Diphtheria Pertussis Tetanus	Polio	Measles	Rubella	Mumps
2 months	X	X			
4 months	X	X			
6 months	X	X(optional)			
15 months[2]			X	X	X
18 months	X	X			
4-6 years	X	X			
14-16 years[3]	X				

[1]Immunizations beginning in early infancy are the recommended practice. They can be provided in later years, however, according to a schedule recommended by a family physician.

[2]Measles, rubella, and mumps vaccines can be given in a combined form, at about 15 months of age, with a single injection.

[3]Children should receive a sixth tetanus-diphtheria injection (booster) at age 14-16 years, and every 10 years thereafter.

Source: Public Health Service. Parents' Guide to Childhood Immunization. DHEW. October, 1977.

munity to reporters and the imposition of criminal and civil sanctions for failure to report are also new trends. Another significant trend is the law that requires a court-appointed guardian *ad litem* independently to represent the best interest of the child in abuse and neglect proceedings. States also have created laws that mandate or encourage the use of multidisciplinary teams in handling child abuse cases.

Preschool: 2 to 6 Years

Growth and Development

During the preschool years, when the child is 2 to 6 years old, the greatest physical, psychosocial, intellectual, and emotional development occurs. The child becomes better

coordinated physically, learns new skills for relating to others, refines skills learned at an earlier age, and acquires a sex role identification. The growth of cognitive abilities is especially rapid during this time. This period prepares the child for the school years through the development of cognitive and social skills.

As the child is exposed to others through play and attendance at nursery school and kindergarten, peer relationships begin to develop. These relationships are the beginning of social roles expected by society.

As preschool children begin to relate to others, they also begin to see themselves as individuals separate from their parents. This period of asserting independence and trying parental control is called the "terrible 2s."

Family Growth and Development

The family of the preschool age child is likely to have a younger child or may be preparing for another birth, which calls for the need to share family resources, time, and attention. The social activities of the family are, therefore, more apt to revolve around the growing children's needs and activities.

During this period, grandparents are moving toward retirement and have more time to devote to the interests of their grandchildren. Health and the ability to maintain independence are likely to persist.

Factors Affecting Growth and Development

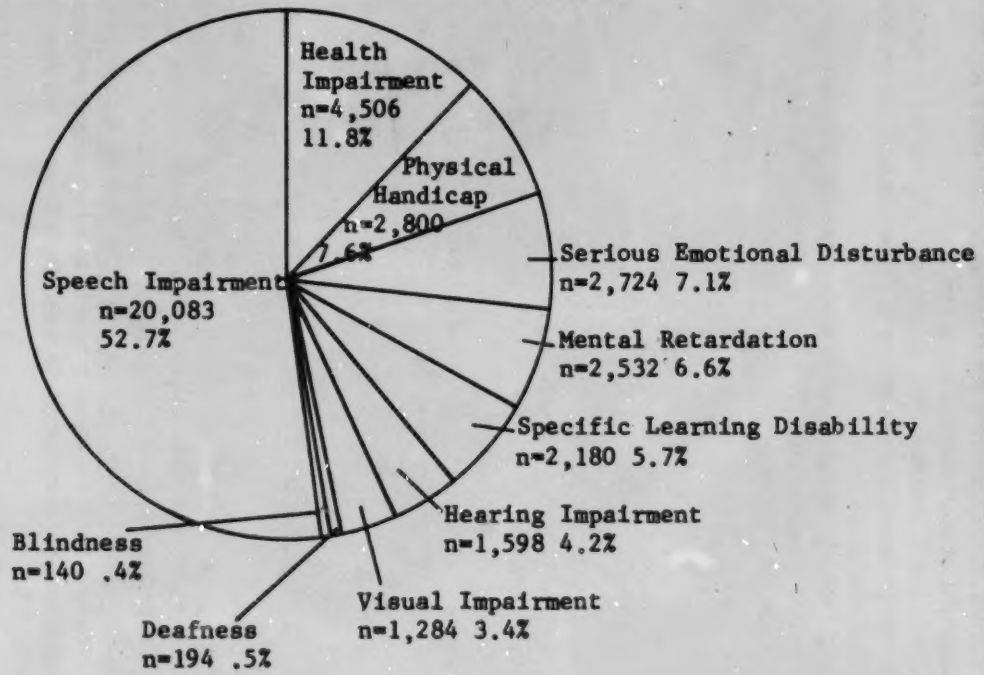
Preschool Preparation. The belief that the preschool years are significant in preparing children for their formal school years was the basis for the Head Start Program. Head Start is a comprehensive preschool program that provides educational, medical, nutritional, and social services for children largely from low-income families. Ten percent of Head Start enrollment slots are made available to handicapped children. The handicapping conditions of children enrolled in the Head Start Program for April-May 1978 are illustrated in Exhibit 2.8.

Day Care. Almost 50% of all children today have mothers who work. The percentage of working mothers with preschool children increased from 14% to 39% between 1950 and 1976. This increase has greatly promoted the need for day care facilities.

During 1976-1977, approximately 900,000 children were enrolled in day care centers in the United States. Virtually all centers enrolled 3- and 4-year-old children, but some centers also enrolled infants and toddlers. Of the children enrolled, the predominant group was 3-, 4-, and 5-year olds (see Exhibit 2.9). The remaining children were split evenly among infants, toddlers, and school-age children.

Single-parent families and low-income families constitute a high proportion of the families using center-based day care. Of U.S. families with children under 18 years of age, less than 20% are single-parent families, and about half have incomes below $15,000 per year.

Exhibit 2.8. Primary or Most Disabling Handicapping Conditions of Handicapped Children Enrolled in Full Year Head Start: April-May 1978.


Health Impairment n=4,506 11.8%
Physical Handicap n=2,800 7.6%
Serious Emotional Disturbance n=2,724 7.1%
Speech Impairment n=20,083 52.7%
Mental Retardation n=2,532 6.6%
Specific Learning Disability n=2,180 5.7%
Hearing Impairment n=1,598 4.2%
Blindness n=140 .4%
Visual Impairment n=1,284 3.4%
Deafness n=194 .5%

Source: The Status of Handicapped Children in Head Start Programs. U.S. Department of Health, Education, and Welfare, Office of Human Development Services, Administration for Children, Youth, and Families. Washington, D.C.: Government Printing Office, February 1979.

Exhibit 2.9. Day-Care Center Enrollment By Age Composition

	Non-FFP Centers		FFP Centers[1]		
	Profit	Non-Profit	Profit	Non-Profit	All Centers[2]
Children Enrolled by Age					
Two Years or Younger	42,700	33,700	13,800	31,600	121,800
Three Years	51,800	57,600	22,200	72,500	204,100
Four Years	62,300	74,800	25,300	95,300	257,600
Five Years	45,500	51,700	19,600	71,200	188,000
Six Years or Older	36,100	33,900	10,400	45,700	126,100
All Ages[2]	238,500	251,700	91,400	316,200	897,700
Percent Distribution by Age					
Two Years or Younger	18	13	15	10	14
Three Years	22	23	24	23	23
Four Years	26	30	28	30	29
Five Years	19	21	21	23	21
Six Years or Older	15	13	11	14	14
All Ages[2]	100	100	100	100	100

[1]Federal Financial Participation(FFP) Centers have at least one child enrolled whose care is paid for at least in part by federal funds.

[2]Totals may not equal sum of components due to rounding.

Source: Day-Care Centers in the U.S.: A National Profile 1976-1977. Department of Health, Education and Welfare, Administration for Children, Youth, and Families, Office of Human Development Services. Washington, D.C.: Government Printing Office.

Funding to states and local communities for day care services is provided through the Administration for Public Services under Title XX of the Social Security Act. The Day Care Division of the Office of Developmental Services also contributes to day care needs by supporting activities and operational programs.

Another source of indirect expenditures for child care is the Aid to Families with Dependent Children Program (AFDC). Under the provisions of AFDC, states compute the income of applicants in order to determine eligibility for benefits. Expenses such as child care, incurred by applicants looking for employment, may be deducted from actual earned income.

Nutrition. Adequate nutrition continues to be an important need of the preschool child. Poor nutrition affects both the physical and mental development of a child, and has an impact on the remaining years of the child's life cycle. Malnutrition among children in poverty leads to low school achievement and eventually to low earning potential. To help child care institutions serve meals to children in their care, the Child Care Food Service Program, operated by the Department of Agriculture, provides money and donates food commodities.

Early School Years: 6 to 12 Years

Growth and Development

With the beginning of the formal school years, the social world of the child expands into the larger world outside the primary family unit (see Exhibit 2.10). At this time, peer groups in a child's daily activities, both inside and outside of school, become dominant forces. The importance of peer groups changes a child's conception of social contacts, which have been chosen up to this time by the child's parents.

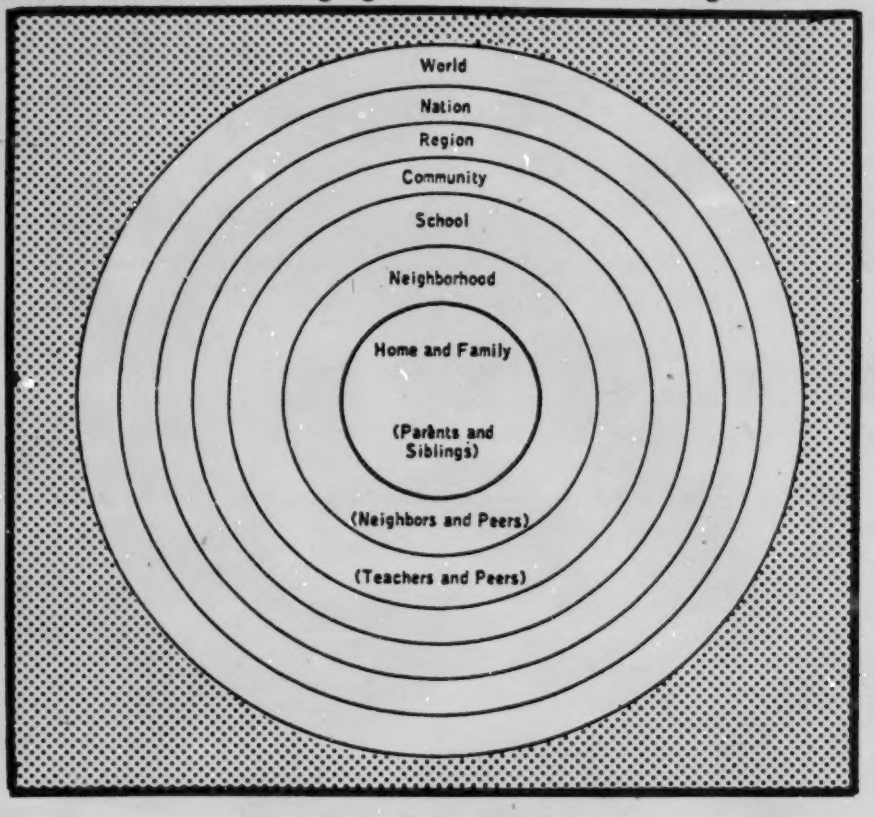
School children between ages 6 and 12 are typically taller and thinner than their preschool counterparts. Boys tend to be slightly heavier and taller than girls, and both sexes show wide variations in height. Children of this age also have acquired increased motor development and are involved in activities requiring greater coordination and strength. During this time, there is also a tremendous growth in cognitive abilities such as the capacity to classify and analyze numbers.

School-age children tend to associate with others of the same sex. Activities and play tend to emphasize the attitude of one group against the other. This sex difference is most pronounced during the fifth grade.

Family Growth and Development

The increasing independence that the child gains may afford the parents more freedom to explore interests outside the home, especially if there are no younger siblings.

Exhibit 2.10. The Enlarging Worlds of the School-Age Child



Source: Hawkes, Glenn R. and Pease, Damaris. Behavior and Development From 5 to 12. New York: Harper & Brothers, 1962.

Mothers may choose to return to work during the child's school years to supplement the family income at a time when earnings have not reached a peak and the demands on family resources have escalated. The health of both parents is usually good during this stage in the life cycle. It is a time of immense activity for all family members as they pursue individual and common interests.

Competition for parental attention is likely to emerge in families in which sibling relationships exist. The firstborn child may also serve as a role model for younger siblings. Additional children are influenced by their elder siblings as well as by their parents.

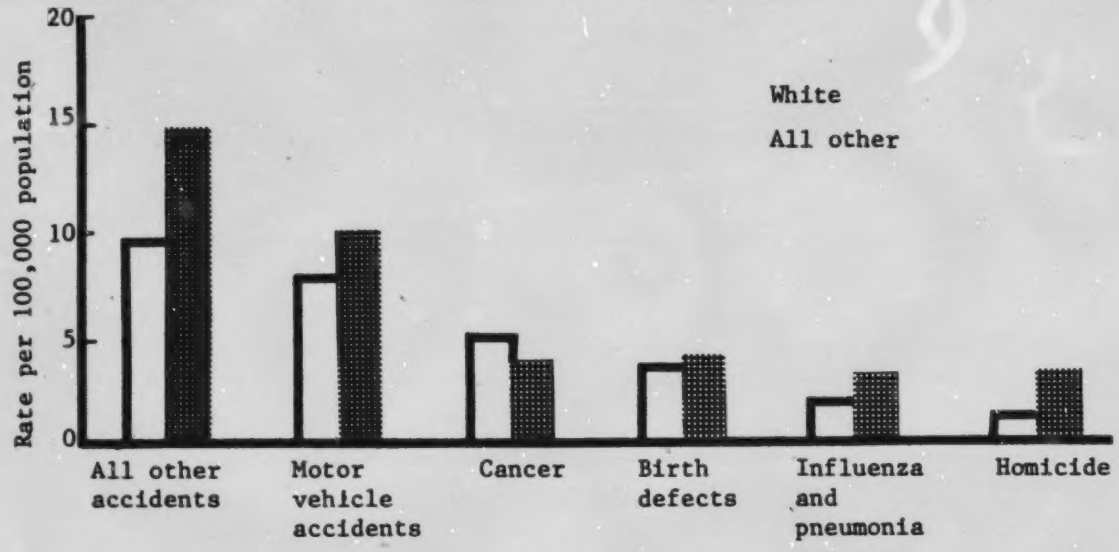
This period in the child's growth requires an adjustment in the parents' perspective: they must relinquish total control of the child's life and begin to share the child with the school and expanding peer relationships. A potential outcome of increased exposure to peers conflicts with parents related to values and social conduct.

By this time, grandparents are adjusting to retirement and diminished income. Usually, these adjustments correspond to decreased physical strength and stamina, which require a change in lifestyle and a new dependence on one's children.

Factors Affecting Growth and Development

Accidents. In 1977, of the American children ages 1 to 14, almost 10,000 were killed in accidents. This figure is three times the number of children in this group who died from cancer, the next leading cause of death. Accidents during 1977 accounted for 45% of total childhood mortality (see Exhibit 2.11). Motor vehicle accidents were responsible for more than 20% of childhood deaths, drownings for 8%, and fires for 6%.

Exhibit 2.11. Major Causes of Death for Ages 1-14 Years: United States, 1976



Source: Healthy People. U.S. Department of Health, Education, and Welfare, Public Health Service. Washington, D.C.: Government Printing Office, 1979.

Mental Retardation. Diagnosis of retardation is usually made when children reach school age. An estimated 6 million American children suffer from mild to severe retarda-

tion. Each year, about 100,000 children are identified as mentally retarded. In about 90% of the cases, the retardation is defined as mild (IQs of 50 to 70). Many cases of mild retardation now are believed to result from deprived sociocultural environment, often associated with poverty. The likely causes are inadequate stimulation or improper nutrition.

Nutrition. To assist in the healthy development of the school-age child, 15 federal programs provide financial assistance to states for feeding children. One of the most comprehensive and important nutrition programs for children is the School Lunch Program. The School Breakfast Program also provides free meals or meals at reduced rates for eligible children.

Prepubescent and Adolescent Years

The latter years of the school-age child are referred to as "the prepubescent period." For girls, this includes the ages of 10 to 12 years; and for boys, 12 to 14 years. This period is characterized by rapid growth and wide variations among both boys and girls, and marks the beginning of adolescence. Adolescence continues for about 10 years or until maturity is reached, either in the late teens or the early 20s.

Growth and Development

Adolescence long has been recognized as a transitional period from childhood to maturity. This period is usually a confusing time, as the adolescent is no longer a child and is not yet an adult. Because of the transitory nature of this state in the life cycle, the adolescent alternates between behavior that is both childlike and adult. During this learning process, the adolescent tries on the adult role and then retreats to the child role, which is safe, familiar, and less demanding. Over time, however, there is a continual movement toward behavior and role adaptations that are adult in nature.

Adolescence is also a time of major growth changes and the attainment of sexual and reproductive maturity. This period of sexual and reproductive maturity is known as "puberty." For girls, this growth usually culminates around 12 years of age; and for boys, around 14 years of age.

Physical changes that occur during puberty are triggered by the pituitary gland, which stimulates production of the sex hormones. These physical changes are seen in both sexes. Along with the development of sex characteristics, adolescents develop a renewed interest in and awareness of their sexual identity. Awkward and self-conscious behavior are also typical during this time, caused by the different rates of growth in various body parts. This growth adds to the difficulty of adjusting to all the changes that occur in the adolescent's life.

Puberty usually lasts around 2 years, during which the adolescent pays considerable attention to physical appearance. Comparisons of one's body size and shape to that which

is considered the ideal is common behavior. The desire for conformity to group ideals and standards exerts a great deal of pressure on the adolescent and is of prime importance to his or her sense of identity.

The need for acceptance by one's peers, especially those of the opposite sex, is accelerated greatly during adolescence. Social contacts with the opposite sex change from group activities to dating. Through dating, the adolescent learns to relate to the opposite sex. Dating is a way of affirming one's identity with the opposite sex and a way of intimately sharing desires and expectations.

Other adjustments and decisions, such as the adolescent's independence from parental authority, moral commitments, and future life career also must be made. In making these adjustments, the adolescent may explore various alternatives before eventually settling on a final choice. These decisions often are frightening. The demands for independence increase as the adolescent moves closer to young adulthood.

Along with the adolescent's developing physical and emotional maturity are his/her increasing ability to reason in an abstract and logical manner and his/her capacity to visualize and plan for the future.

Family Growth and Development

Parents of adolescents must accept and respect the decisions made by their emerging adult children. Many of their decisions, such as educational goals, career choice, and eventual selection of a mate, will affect adolescents' future lifestyle. A difficult adjustment that parents must face is the "empty nest" syndrome, caused when the last child leaves home. This change necessitates the establishment of new goals and interests for the parents.

At the same time that parents are adjusting to the independence of the maturing adolescent, the grandparents are likely to become more dependent and less able to meet their daily needs. Demands for appropriate care and sharing of financial resources often are the result of this dependence.

Grandparents also are likely to be facing the death of spouse and friends, along with the adjustments to diminishing health and financial resources. To remedy these problems, several courses of action may be needed. Selling the grandparents' home, placing the grandparents in a nursing home or other extended care facility, or integrating them into their children's homes are all possibilities.

Problems Encountered by Teenagers

Sexually Transmissible Diseases. The incidence of sexually transmissible diseases begins to appear with the onset of active sexual behavior during adolescence. These diseases increasingly threaten the health and well-being of young people. Of the 10 million cases that occurred in the United States in 1977, 86% were attributed to 15- to 29-year olds. The most common sexually transmissible diseases are listed in Exhibit 2.12.

Many infections are not recognized because of the lack of obvious symptoms. An estimated 75,000 women of childbearing age become sterile each year as a result of pelvic inflammatory disease caused by a sexually transmitted infection.

Exhibit 2.12. Most Common Sexually Transmissible Diseases

trichomoniasis--3 million cases annually
gonorrhea--2.5 million cases
non-gonococcal urethritis(NGU)--caused by organisms such as chlamydia and mycoplasma--2.5 million cases
genital herpes--300,000 cases
syphilis--25,000 new cases a year

Source: Healthy People. U.S. Department of Health, Education, and Welfare, Public Health Service. Washington, D.C.: Government Printing Office, 1979.

The Venereal Disease Bureau of the Center for Disease Control funds state and local health departments for the treatment and control of these diseases, including syphilis and gonorrhea.

Teenage Pregnancies. Another sexually related problem involving adolescents is the incidence of pregnancy and birth to individuals who are unprepared for the demands and responsibilities involved in child care activities.

In 1976, nearly one-fifth of all infants were born to young women under 20 years of age. About two-fifths of these infants were born to teenagers under 18 years of age. About 40% of these young mothers (15 to 19 years of age) were not married when their babies were born. Of these teenagers, about 36% of the births to white teenagers and nearly 90% of the births to black teenagers, ages 15 to 17, were out-of-wedlock. Furthermore, 1976 was the first year that out-of-wedlock black births exceeded 50% of all black births.

Women who have their first child as teenagers have a greater risk of poverty and welfare dependency. Nearly half of government expenditures through the Aid to Families

with Dependent Children Program (AFDC) is for households with women who were teenagers when their first child was born.

Teenage Unemployment. Many adolescents, especially those in minority groups, are faced with problems of unemployment. Nearly one-half of all unemployed persons in the United States are between the ages of 16 and 24, even though this age group accounts for only one-fourth of the total labor force.

Unemployment among nonwhite youths is much higher than among whites. The unemployment rate for nonwhite teenagers is almost three times the rate for white teenagers. Factors such as education, income, race, and where youths live varies greatly and influences their employment status.

To deal with youth unemployment problems, the Federal government supports four experimental programs authorized by the Youth Employment and Demonstration Projects Act (YEDPA). The four experimental programs supported are (1) the young adult conservation corps, (2) youth incentive entitlement pilot projects, (3) youth community conservation and improvement projects, and (4) youth employment and training programs.

The Comprehensive Employment and Training Act (CETA) responds to youth unemployment by providing training and employment programs that are operated by state and local prime sponsors through grants. Increased emphasis has been placed on assisting youth in finding unsubsidized private sector jobs.

Summary

With the attainment of biological and social maturity, young adults accept the roles and functions expected of them by society. These major roles usually involve working, marriage, parenting, and community participation.

The success and satisfaction the individual achieves in adult roles depends to a great extent upon the success and nurturing gained during the early years of growth and development. Basic human needs and skills are seen as essential building blocks in the achievement of the more complex and integrated roles of adulthood.

Adults are required to continue personal development throughout their life cycle. Adapting to changing conditions and circumstances, and continuing to maintain a sense of continuity and purpose in one's life goals and direction, are essential elements of adult growth.

BIBLIOGRAPHY

Aldous, J. *Family careers: Developmental changes in families.* New York, New York: John Wiley & Sons, Inc., 1978.

Brophy, J.E. *Child development and socialization.* Chicago, Illinois: Science Research Associates, Inc., 1977.

Chilman, C.S. *Adolescent sexuality in a changing American society: Social and psychological perspectives.* Washington, D.C.: National Institutes of Health, U.S. Department of Health, Education, and Welfare. DHEW Publication No. (NIH) 79-1426, 1979.

Coelen, C., Glantz, F., & Calore, D. *Day care centers in the U.S.: A national profile, 1976-77.* Cambridge, Massachusetts: Abt Associates, 1979.

Congress of the United States. Budget issue paper for fiscal year 1979. Washington, D.C.: Congressional Budget Office, 1978.

_____. Background paper: Childcare support. Washington, D.C.: Congressional Budget Office, 1978.

Craig, G.J. *Human development.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1976.

Gesell, A., Ilg, F.L., & Ames, L.B. *The child from five to ten.* New York, New York: Harper & Row Publishers, 1977.

Giraldo, Z.I., & Weatherford, J.M. Life cycle and American families: Current trends and policy implications. Durham, North Carolina: Working paper of the Center for the Study of Family and the State, Institute of Policy Sciences and Public Affairs, Duke University, 1978.

Girls Clubs of America, Inc. *Today's girls: Tomorrow's women.* Racine, Wisconsin: Wingspread Conference Center Seminar, June 13-15, 1978.

Grotberg, E.H. (Ed.). *200 years of children.* Washington, D.C.: Administration for Children, Youth, and Families, Office of Human Development, U.S. Department of Health, Education, and Welfare. DHEW Publication No. (OHD) 77-30103, 1977.

Hawkes, G.R., & Pease, D. *Behavior and development from 5 to 12.* New York, New York: Harper & Row Publishers, 1962.

Jones, A.E., & Placek, P.J. *Teenage women in the U.S.A.: Sex, contraception, pregnancy, fertility, and health.* Washington, D.C.: National Center for Health Statistics, Division of Vital Statistics, 1978. Presented at the October 1978 Conference of the Family Impact Seminar, George Washington University, Washington, D.C. Forthcoming as a chapter in T. Ooms (Ed.), *Teenage pregnancy and family impact.* Philadelphia, Pennsylvania: Temple University Press, 1980.

McHale, M.C., & McHale, J., with Streatfield, G.F. World of children. *Population Bulletin,* 1979, 33(6).

National Academy of Sciences. *Recommended dietary allowances.* Washington, D.C.: Food and Nutrition Board, 1980.

Office of Management and the Budget. *The budget of the United States Government: Fiscal year 1980.* Washington, D.C.: 96th Congress, First Session, House Document No. 96-246, 1980.

Paplia, D.E., & Olds, S.W. *Human development.* New York, New York: McGraw-Hill, Inc., 1978.

Population Reference Bureau, Inc. Marrying, divorcing, and living together in the U.S. today. *Population Bulletin*, 1977, 32(5).

Robbins, W.J. *Growth.* New Haven, Connecticut: Yale University Press, 1928.

Rugh, R., & Shettles, L.B. *From conception to birth: The drama of life's beginnings.* New York, New York: Harper & Row Publishers, 1971.

Shirley, M.M. *The first two years.* Child Welfare Monograph No. 7. Minneapolis, Minnesota: University of Minnesota Press, 1932.

Tryon, C., & Lilienthal, J.W., III. Guideposts in child growth and development. *NEA Journal,* 1950, 39(189).

U.S. Department of Health, Education, and Welfare. *Parents' guide to childhood immunizations.* Washington, D.C.: Public Health Service. DHEW Publication No. (OS) 77-50058, October 1977.

_____. *Head Start Newsletter, January/February 1979.* Washington, D.C.: Project Head Start; Administration for Children, Youth, and Families; Office of Human Development Services, 1979.

_____. *The status of handicapped children in Head Start programs.* Washington, D.C.: Administration for Children, Youth, and Families; Office of Human Development Services. DHEW Publication No. (OHDS) 79-31130, 1979.

_____. *Healthy people: The Surgeon General's report on health promotion and disease prevention.* Washington, D.C.: Public Health Service. DHEW Publication No. (PHS) 79-55071, 1979. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 017-001-00416-2.

Zanden, J.W.V. *Human development.* New York, New York: Alfred A. Knopf, 1978.

CHAPTER 3

STATUS OF CHILDREN

Numbers and Distribution

General

On July 1, 1978, the number of American children under age 14 totaled 46.7 million. The number of children in the United States has declined by 13% since 1970 (see Exhibit 3.1). This continues a trend begun in 1960 of children becoming a steadily decreasing proportion of the total population. The fewer number of children is the result of a decline in the total fertility rate (the average number of lifetime births expected by young women). The fertility rate peaked at 3.8 in 1957, and by the early 1970s, it had dropped to 2.5. By 1978, the rate had dropped to about 1.7. This represents both a growing preference for the two-child family as well as an increasing proportion of women expecting to remain childless or to have only one child. Young women are postponing childbearing to pursue their own education and career goals and tend to have fewer children. In addition, the cost of rearing a child is growing and incomes are not keeping pace with inflation.

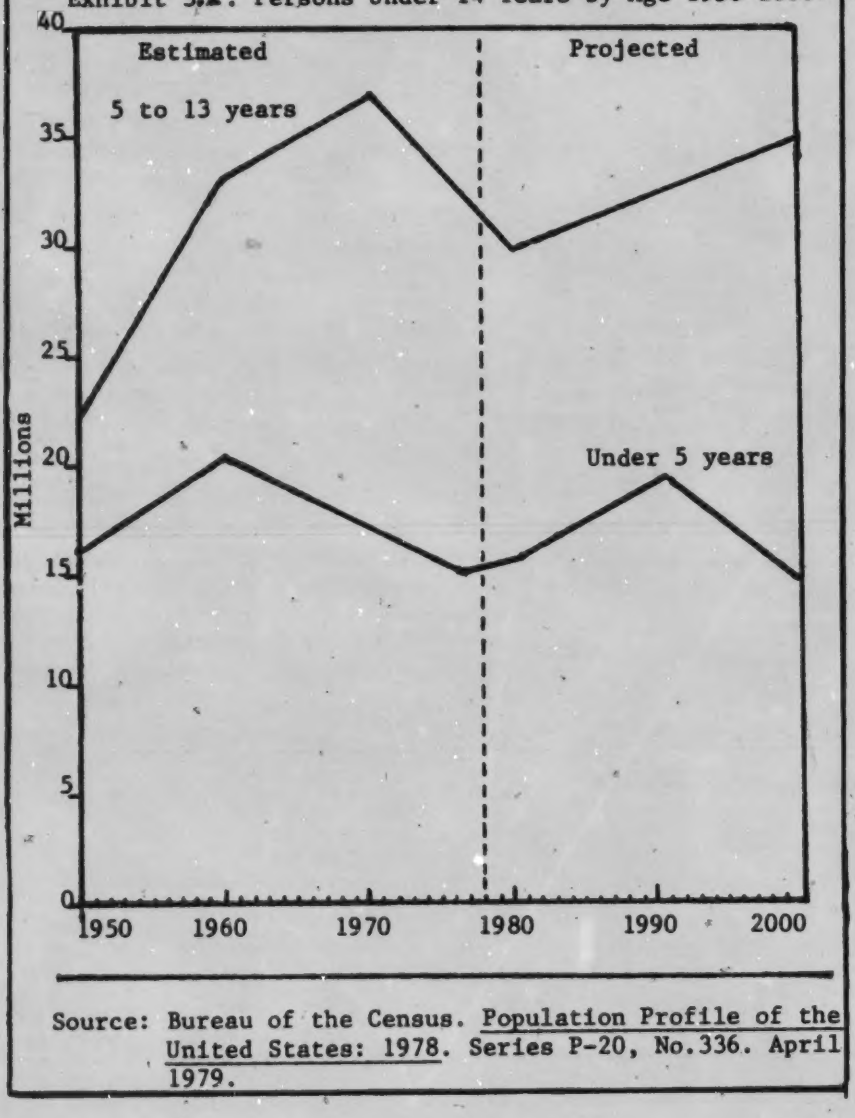
Exhibit 3.1. Children Under 14 years, 1970 and 1978

	Number of children under 14 years old (in thousands)		Percentage change, 1970 to 1978
	1970	1978	
Under 5 years	17,163	15,361	-10.5%
5-13 years	36,675	31,378	-14.5%
Total under 14	53,838	46,739	-13.2%

Source: Bureau of the Census. Population Profile of the United States: 1978. Series P-20, No. 336, April 1979.

Although the fertility rate may continue to fall, the absolute number of children is likely to increase over the next 10 years (see Exhibit 3.2). This is caused by the large number of postwar babies (members of the baby boom) who are reaching childbearing age.

Exhibit 3.2. Persons Under 14 Years by Age 1950-2000



Source: Bureau of the Census. Population Profile of the United States: 1978. Series P-20, No.336. April 1979.

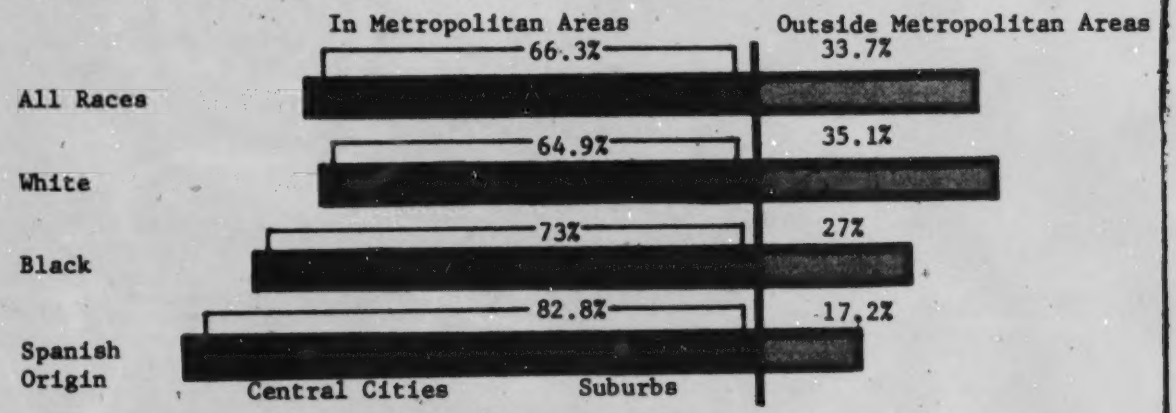
While all societal institutions and programs have been influenced by changes in the childhood population, the changes have not occurred evenly. More than other areas, central cities and rural areas have been affected by large decreases in childhood populations. These two areas are likely to have empty classrooms and little prospect for filling them. Maternity wards are decreasing in size or closing down in some hospitals.

Mobility. Like their parents, American children are "on the move." In 1978, 53.4% of children, ages 3 and 4, and 41.4%, ages 5 to 9, had moved during the previous 3-year period. One-third of those under age 5 and one-quarter of those between 5 and 9 years

who moved remained in the same county. The high degree of mobility often removes the child and his/her family from the support system that grandparents, uncles, aunts, cousins, and long-term neighbors can provide.

Ethnic and Regional Distribution. The Census Bureau reports that 83% of all children under 14 were white, 15% were black, 6% were of Spanish origin, and 2% were of other races. Over two-thirds of white children (64.9%) lived in metropolitan areas, with the largest number living in the suburbs. Black children and Hispanic children also lived primarily in metropolitan areas, but the largest number was located in the central city (see Exhibit 3.3). Recent years have seen a slight increase in the percent of children living outside metropolitan areas which follows a general trend toward moderate gains in population of cities of medium size.

Exhibit 3.3. Children Under 14 by Residence, Race, and Spanish Origin, 1977



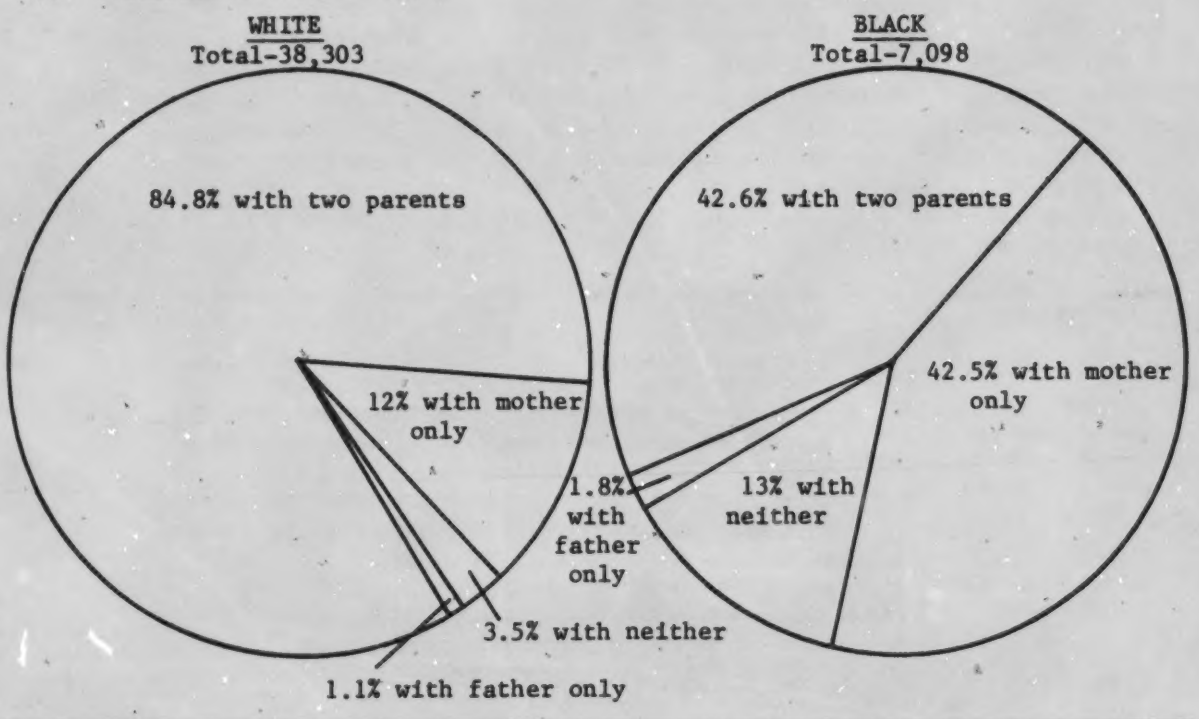
Source: Bureau of the Census. Special Studies P-23, No. 75, 1978.

Family Setting

Although 99% of both white and black children live in families, the form of the family is changing. The percentage of children living with both parents has declined dramatically since 1960. In 1978, 78% of all children under 14 lived with two parents, a decrease of almost 10% from 1960. In absolute terms, this means that over 8 million children under 14 are living with one parent, and another 1.7 million are living with neither parent. Most white children (84.8%) lived with both parents, while less than half of black children (42.6%) lived with both parents. Black children also were more likely to live with a nonparental relative (see Exhibit 3.4).

The decline in the number of children in two-parent families is mainly the result of a soaring divorce rate. One in three marriages now ends in divorce. Current estimates show that between 20% and 30% of children growing up in the 1970s eventually will have divorced parents. Another 5% to 10% will be living with a single parent because of annulment, separation, or death.

Exhibit 3.4. Living Arrangements of Children Under 14 Years of Age by Race, March 1978 (numbers in thousands)



Source: Bureau of the Census. Current Population Reports. Series P-20, No. 338. May 1979.

However, yearly statistics on children living with one parent are slightly misleading. The majority of these children eventually will have a two-parent family with one biological parent. Four out of five divorced persons remarry within a 5- to 6-year period.

Effects of Divorce. The 5- to 6-year period before remarriage may represent a psychologically and socially significant part of a child's life span. Stress in parental relationships causes stress on the child and may warrant temporary outside support to prevent permanent problems. The specific kind of support depends on the age of the child, but all children need help in understanding difficult periods. The parent may be unable to provide the necessary support when it is needed.

Traditionally, children of divorce have been considered more likely than others to be delinquent, psychologically disturbed, and low achievers. However, recent research using adequate controls for economic status suggests that differences in long-term behavior between children from one- and two-parent homes of comparable economic status are small or even nonexistent. The fact remains, however, that divorce is more prevalent among poor families and that children are more likely to remain with their mothers. Only

47% of divorced women receive alimony or child support; the median amount received is about $1,350 a year. Many children of divorce are burdened, at least temporarily, with the economic hardship that is characteristic of female-headed households.

Step-Families. America's high divorce rate and high remarriage rate have created in growing numbers the phenomenon of the step-family. Between 10% and 15% of all households, with 8 to 10 million children, are step-families. Understandably, children with step-parents face difficult adjustments. Current research on the long-term effects of these adjustments is inconclusive. Issues common to all families, but exacerbated in the step-family, include the problems of consistent discipline, money policies, and establishing supportive relations with members of the extended step-family.

Children Not in Families

When a child's family is undergoing difficulties, a child may be placed in a foster care facility. A little more than half a million American children (502,000) are currently receiving foster care. The vast majority (79%) are in foster family homes, 14% are in child care institutions, and the remainder are in group homes (see Exhibit 3.5).

Exhibit 3.5. Types of Foster Care Facilities

Foster Care Facility	Number (000)	Percent
Foster family home	395*	79
Public group home	12	2
Private group home	23	5
Residential treatment center	29	6
Other public child-caring institution	21	4
Other private child-caring institution	22	4
Total	502	100

*Includes situations of mother and child in same foster family placement.

Source: National Study of Social Services for Children and Their Families, DHEW 1978, P110.

The median age of children living in foster family homes (395,000 in all) was 9.7 years. For institutions, the median age was 13.3 years. "Neglect of the child," often caused by economic factors, was the largest single reason given for placing a child in a foster family home. "Emotional problems of the child" was the major reason given for placing a child in a group home or institution.

Children who are removed from their troubled homes and placed in a temporary foster home frequently become permanent participants in the foster care system. Two and one-half years is the median length of time children spend in foster care, and nearly 25% of the children have been under foster care over 6 years. Twenty-two percent of

children in foster homes have been with at least three foster families. This instability in care is contrary to a child's need for trusting and stable relationships with caring adults.

Experts agree that reform of the foster care system is needed. Separation of parents and children is being prevented by attempts to provide families with additional job training, income supplements, day care services, and homemaking assistance. When separation is necessary, first consideration is given usually to a relative, who also receives financial aid. Adoption is considered preferable to multiple foster family placements when permanent separation occurs.

Economic Environment for the Child

The social and economic environment in which a child is reared is the most important predictor of a child's overall well-being. Almost all data support the fact that a child's health, education, later employment, and earnings depend heavily on the economic status of his/her family. The data suggest that adequate family income is the best predictor of a successful childhood and future adult life.

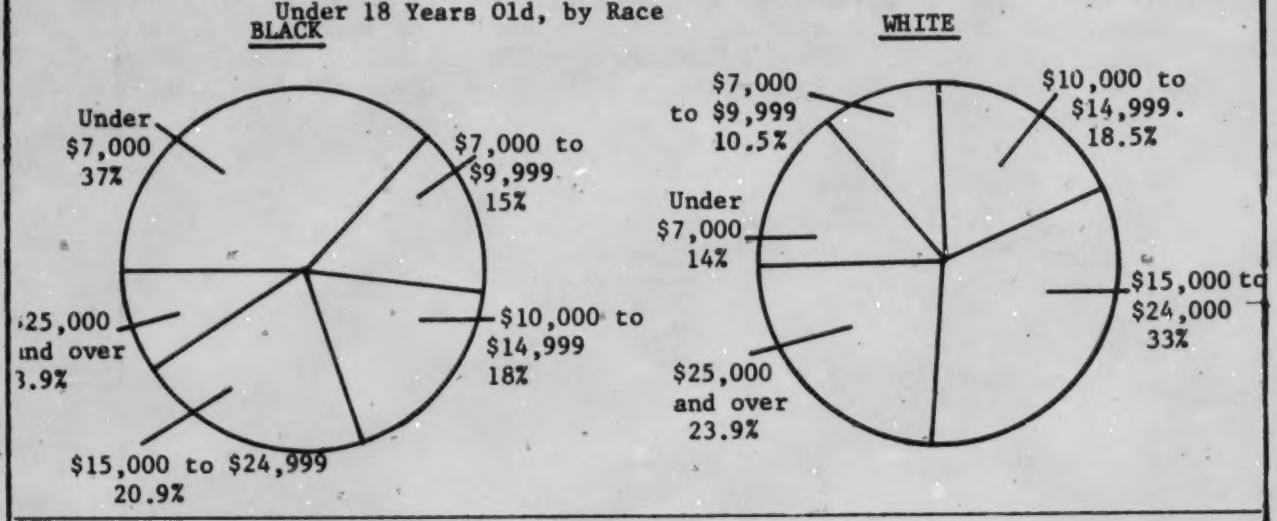
The economic situation of a child is a reflection of his/her family's structure and ethnic background. Children who live in households headed by women, or who are black or of Spanish origin, disproportionally live in families whose incomes are below the median and often below the poverty level. These disproportionately lower incomes are often the result of discrimination in employment opportunities and wages.

Family Income

In 1977, the median income for a white husband-wife family with children was $18,756. The income for this kind of black family was $13,832, or 73% of the white family income. For Spanish-origin families with children, median income was $13,432. The median income for families headed by females, regardless of race, was far below the national median ($16,000) for all families. White female-headed households with children had a median income of $7,160 or 38% of that of white two-parent households with children. In black and Spanish households, female-headed families earned 40% ($5,551) and 39% ($5,247), respectively, of the amount earned by husband-wife families. Seventy percent of women heading families were clustered in clerical, service, and operative functions. The usual median weekly earnings in May 1977 in these jobs ranged from $59.00 for private household workers to $167.00 for clerical workers.

Family Budget. According to the Bureau of Labor Statistics, an "intermediate" family budget for an urban family of four is $18,602, which is nearly the median income for this kind of family. This budget permits spending $89.00/week on food; $270.00/month on rent or mortgage, utilities, home furnishings, and maintenance; and $18.32/week (or $956.00/year) on leisure activities. In 1977, almost half of all white families with children under 18 could afford this budget, as could approximately one-quarter of all black families with children under 18 (see Exhibit 3.6).

Exhibit 3.6. Distribution of Income in 1977 Among Families With Related Children Under 18 Years Old, by Race



Source: Bureau of the Census. Money Income in 1977 of Families and Persons in the U.S. Series P-60, No. 118. March 1979.

From World War II to the 1970s, the standard of living for all Americans, including children, rose steadily. The distribution of income, however, hardly has changed. The top fifth of families continue to receive nearly 48% of all income and the bottom fifth gets a little less than 4%. A child's future chances for a good education and job are influenced heavily by the income of the family into which he or she is born. Of children of equal intelligence, those from families in the top fifth income stratum are five times more likely to attend college than a bright child from the bottom fifth. A child born into a family having an income in the top 10% is 27 times more likely to earn a similarly high income as an adult than a child born into a family in the bottom tenth income stratum.

Children and Poverty

In 1977, over 10 million American children (16%) lived in families with an income below the official poverty level ($6,191). The number and relating percentage of poor American children have increased since 1969, but are still much lower than the 1950s, when 17 million children, or 27% of all children, lived in poverty. Poverty rates vary significantly by the head of household's sex and race. In 1977, 50% (5 million) of all children living in households headed by a female, and 40% of all black children lived in poverty (see Exhibit 3.7). Both blacks and women face discrimination in jobs and salary. Women and blacks are concentrated in low paying occupations, and, even within the same occupation and with equivalent education, are paid less than white males. Nearly 1.6 million children live in families in which, even with both parents working, income is

Exhibit 3.7. Children in Families Below the Poverty Level by Head of Household, Race, and Spanish Origin: 1977

	Number of children under 18 years below poverty level (numbers in thousands)	Percent of children under 18 years below poverty level
All types of families		
All children	10,028	16.0%
White	5,943	11.4%
Black	3,850	41.6%
Spanish Origin	1,402	28.6%
Children in families with male head		
All children	4,371	8.5%
White	3,250	7.1%
Black	965	19.3%
Spanish Origin	716	17.9%
Children in families with female head		
All children	5,658	50.3%
White	2,693	40.3%
Black	2,885	65.7%
Spanish Origin	686	68.6%

Source: Bureau of the Census. Characteristics of the Population Below the Poverty Level: 1977. Series P-60, No.119, March 1979.

below the poverty level. Two million children live in a family headed by a woman who works full-time and earns below the poverty level.

The effects of poverty on children begin before birth and can last for life. Babies of poor mothers tend to weigh less and, during the first year of life, have a death rate two-thirds greater than the nonpoor. Malnutrition among children living in poverty can lead to mental retardation. The environment in which poor children live, frequently in conditions of bad sanitation and substandard housing, makes them much more likely to suffer rat bites, lead paint poisoning, and worms.

Government Programs

A number of government programs provide services and financial support to families

of poor children. The major program is Aid to Families with Dependent Children (AFDC), which provides money to families. In 1977, of the more than 10 million children living below the poverty level, 7.7 million children, ages 18 and younger, received AFDC. Eighty percent of AFDC families had only one adult present -- usually the mother. One-third of AFDC children were under age 6 when a parent's care is most needed and facilities for child care are most lacking. Eighty-four percent of children receiving AFDC were age 14 and younger. The average size of an AFDC family was 2.2, about the same as the rest of the population.

States are responsible for determining a standard of need and then deciding what percentage of that standard they will meet. On the average, states were meeting 87% of this defined need for a family of four. In July 1978, the average amount paid to an AFDC family of four (mother and three children) with no other income was $3,708 a year, or about half of the official poverty level.

AFDC recipients in 1978 totaled 10,325,000, of whom 7,211,000 were children. Total costs for the year were $10,729 million.

There was a great variability throughout the United States in the amount of money a family of four received. A family without any accountable income would have received the largest monthly payment in Hawaii ($546), and the lowest in Mississippi ($101), $25 a month per recipient, or $6.25 a week. Between July 1977 and July 1978, the average state payment to a family of four rose 5%, a period of time in which the consumer price index showed a nation-wide 7.7% increase in costs. The maximum benefits available from AFDC and Food Stamps combined currently exceed the poverty line in only six states.

Overwhelmingly, Americans favor helping children in need. A CBS/New York Times national telephone survey found 81% of their sample in favor of "helping poor people buy food for their families at cheap prices" (Food Stamps), and "providing financial assistance for children raised in low-income homes" (i.e., AFDC).

Health and education programs also address the problems and needs of children in families in poverty. These are included in the following sections.

Health and Nutrition

American children are healthier today than ever before in the history of this country. They have a longer life expectancy, can be immunized against most infectious diseases, can be protected against environmental hazards and accidents, and can have early identified problems corrected. They have access to good nutrition and medical care as needed.

The health problems that remain relate to the adverse effects of poverty; the lack of use of available services and facilities; the reluctance to change styles of life, eating, and exercise; environmental hazards; and the fact of membership in a minority group. These conditions and their impact are described in this chapter.

Infant Mortality

Increasing numbers of American babies are surviving beyond birth and the first year. Between 1970 and 1978, infant mortality dropped from 20 to 13.6 per 1,000 live births. Nonetheless, the Surgeon General has listed the reduction of infant deaths as one of his major goals. He hopes to bring the rate down to 9 deaths per 1,000 live births by 1990.

Infant mortality is linked closely with poverty. Black infants are nearly twice as likely to die before their first birthday as white infants. However, black infants born of middle class parents have mortality rates comparable to those of whites.

Low Birthweight. Of all infant deaths, two-thirds occur in babies weighing less than 5.5 pounds (2,500 grams) at birth. Infants below this weight are also more than 20 times as likely to die within the first year. In addition, low birthweight is associated sometimes with increased occurrence of mental retardation, birth defects, growth and developmental problems, blindness, autism, cerebral palsy, and epilepsy.

Many maternal factors are associated with low infant birthweight: lack of prenatal care, poor nutrition, smoking, alcohol and drug abuse, age (especially youth), poverty, and marital status. Given no prenatal care, an expectant mother is three times as likely to have a low birthweight child. Many women least likely to receive adequate prenatal care are those most likely to have the other risk factors (poverty, youth, poor nutrition). Those at greatest risk – black adolescent women – are least likely to receive early prenatal care. In 1976, 14% were recorded as not receiving any prenatal care at all during the first two trimesters of pregnancy. During the same year, the proportion of low birthweight babies born to adolescent black mothers was twice as high as the national proportion (15% vs 7%). (See Exhibit 3.8.)

Exhibit 3.8. Infants Weighing 2500 Grams or Less at Birth According to Age and Race of the Mother

Age of mother	Percent of infants weighing 2500 grams or less at birth		
	All races	White	Black
All ages	7.3%	6.1%	13.0%
Under 15 years	15.0%	12.1%	16.9%
15-17 years	11.2%	9.1%	15.1%
18 years	9.8%	8.0%	14.5%
19 years	8.9%	7.2%	13.9%
20-24 years	7.2%	6.0%	12.7%
25-29 years	6.0%	5.2%	11.3%
30-34 years	6.4%	5.7%	11.6%
35-39 years	8.0%	7.0%	13.1%
40 years and older	9.3%	8.4%	12.6%

Source: National Center for Health Statistics. Health, United States: 1978. DHEW Publication(PHS) No. 79-55071, 1978.

Maternal nutrition is a critical factor for infant health. Pregnant women lacking proper nutrition have a greater chance of bearing either a low weight infant or a still-born. Diet supplement programs, such as the Department of Agriculture's Women and Infant Care Program (WIC), make food available to pregnant women who meet income requirements, live within the geographic area being served, and are considered at "nutritional" risk. Infants born to WIC recipients automatically are eligible for participation. Toddlers whose growth seems stunted also are eligible.

Birth Defects. Birth defects are second only to low birthweight as threats to infant survival. They are the second leading cause of death for children, ages 1 to 4, and the third leading cause for those ages 5 to 14.

Increasingly, environmental factors are being recognized as playing an important role in causing birth defects. Radiation and chemicals in the workplace can produce fetal malformation and possible subsequent cancer. Of extreme concern are possible effects on sex cells that can alter biological development indefinitely. In the first 3 months of pregnancy, the fetus is particularly vulnerable to birth defects; and women are at risk working among hazardous substances, such as lead, organic solvents, radiation, anesthetic gas, polyvinyl chloride, carbon monoxide, and carbon disulfide.

Drugs taken during pregnancy also have been linked to birth defects. For instance, women, who take female sex hormones while pregnant, are twice as likely as comparable women to have babies with heart defects. Other well-known examples include the deformities that the taking of thalidomide produced and the vaginal cancer in daughters of women who took DES (diethylstilbestrol) during pregnancy. Recent research has linked smoking and damage to a baby's blood vessels.

In the last several years, researchers have conducted a number of studies on infants born to women who drank heavily during pregnancy. A significant number were born with "Fetal Alcohol Syndrome." These babies were shorter and lighter in weight than normal, most were mentally retarded, had small heads, facial irregularities, heart defects, joint and limb abnormalities, and poor coordination. Some infants were born with all these characteristics, while others showed only some features.

In 1975, 523,225 children, under age 21, were treated under the State Crippled Children's Services. The nonwhite utilization rate was three times that of the white children. Nearly one of three children was under 6 years old; 28% were ages 5 to 9; 24% were ages 10 to 14. More than one-half of the new patients were under 5 years old. The estimated cost to taxpayers is about $160 million each year, and this service is available only to children whose families cannot afford private care.

Sudden Infant Death Syndrome. Certain babies, without apparent cause or warning, suddenly stop breathing during sleep and die, even after an apparently uncomplicated pregnancy and birth. This unexplained event, called "Sudden Infant Death Syndrome," or "Crib Death," is believed by some authorities to be the leading cause of death for babies older than 1 month. In 1977, 4,751 infants died from this phenomenon, over half by 3 months of age and 91% in the first 6 months of life (see Exhibit 3.9). A number of theories as to causation have been proposed. Minor infections, usually of the airway and usually viral, prematurity, and low socioeconomic status as well as maternal smoking have been proposed, but more research is needed.

Exhibit 3.9. Age Distribution (425 SIDS Cases)

Age (Months)	Number	Percent
0–1	19	4%
1–2	107	25%
2–3	113	27%
3–4	73	17%
4–5	49	11%
5–6	31	7%
6–7	11	
7–8	8	
8–9	7	
9–10	3	9%
10–11	3	
11–12	1	
Over 12	0	

Source: Public Health Service. The Sudden Infant Death Syndrome. DHEW Publication No. (HSA) 78-5251. 1978.

Death and Disease After 1 Year of Age

Accidents. The leading cause of death for children, ages 1 to 14, is accidents. Injuries from accidents and violence kill more children than any disease. Almost 10,000 American children were killed last year in accidents, more than three times as many as died from the next leading cause of death – cancer. Motor vehicle accidents are responsible for more than 20% of childhood deaths, drowning for 8%, and fires for 6%. Use of car seats and seat belts is crucial. Failure to provide and use adequate car restraints for children, especially toddlers, is the cause of at least 1,000 auto accident deaths and up to a million injuries each year for children under age 5.

Prevention of injuries should begin around the home, since more than half of all injuries to children and youth under 18 that resulted in restricted activity or medical attention occurred at home.

Infectious Disease. Disease used to be the leading cause of death among children. Because of immunization, death caused by communicable disease has decreased dramatically. During the 1970s immunization levels among young children have improved for the measles, rubella, and the mumps. Immunization against measles increased from 57% in 1970 to 63% in 1978. Since 1973, the immunization against the mumps increased from 35% to 51%. Protection against DTP (diptheria, tetanus and pertussis) and polio, however, has declined. As of mid-1979, 90% of children, ages 5 to 14, had been immunized against measles, polio, diptheria, tetanus, and pertussis and about 84% against rubella.

The more serious situation, however, is among children, ages 1 to 4. In 1978, about 38% had not been immunized against rubella, 37% had no measles vaccination, and 49% were without mumps vaccination. About 39% had not received the recommended dose schedule of polio vaccine, and 32% had not received the appropriate DTP vaccine schedule.

Children living in poverty and inside central cities were the least likely to be immunized. Within the central city, 61% of the children, ages 1 to 4, living in nonpoverty areas in 1978 had been immunized against rubella, compared with 51% of the children in the poverty areas. Similarly, about 60% of the children living in nonpoverty areas were immunized adequately against polio, compared with 43% in poverty areas. The role of poverty in health care again is underlined.

Currently, a nation-wide effort is underway to immunize the 20 million children now unprotected and to establish a permanent system to provide immunization to the 3 million children born each year in the United States. Many states are requiring immunization for children entering school.

Respiratory Disease. Of all diseases affecting children, respiratory conditions cause more disability and require more use of medical services than any other. During 1975-76, respiratory conditions accounted for 61% of all school days children missed because of illness and 25.6% of all visits to physicians. A fifth (21%) of the days children spent in short stays in hospitals were caused by respiratory conditions.

A Special Problem: The Abused Child

Traditionally, parents have been given total responsibility for the welfare of their children. Because of the lack of societal sanctions for child abuse, some parents have continued to abuse their children. In recent years, however, government legislation, medical care, and social services have been undertaken to aid abused children and their families.

The exact incidence of child abuse is unknown. Estimates range from a low of 70,000 cases per year to highs of 4 to 5 million. An often quoted statistic is that 1.6 million cases of child abuse are committed each year, with 2,000 to 5,000 children killed as a result of abuse. The mortality rate of abused children, ages 1 to 6 months, is said to be second only to the high incidence of sudden infant death syndrome. In children, 1 to 5 years old, abuse is second only to true accidents as cause of death.

Legislation requiring mandatory reporting of child abuse was enacted in 1974. The identification and subsequent response to an incidence of abuse are important, primarily because abuse recurs in approximately 50% of cases where no help is given. In 35% of these cases, a child will be injured severely – or killed.

Effects of Child Abuse. The effects of child abuse range from severe physical disabling to mental retardation, brain damage, and language delay. Recent medical research has linked severe physical growth retardation to emotional neglect. Although abuse affects children of all ages, the kind of abuse varies with age. Infants and preschool children are most likely to be abused physically. More attention has been focused recently on the problem of sexual abuse, which primarily affects school age and adolescent girls.

A number of studies have identified families "at risk" for child abuse. The major social factors that account for child abuse of children from 3 to 17 years of age include:

- the pressure of placing most of the burden of child care on the mother.
- the economic and psychological stress created by poverty.
- isolation from help and social control.
- parents who have been punished physically as children abuse their children more often, as do parents who fight with each other or who saw their parents hit each other.

Programs. A variety of programs to deal with the problem of child abuse currently exists. Federal and private monies are being used to provide child care centers in which families may leave their children in times of stress. Medical and social service personnel are being trained to identify families "at risk" and are offering programs of support for these families prior to and after childbirth. Regular support for parents who have abused their children has produced dramatic decreases in reinjury rates. Parents Anonymous, which has over 500 chapters, is a self-help organization that provides a place for parents to gain self-esteem and reduce their social isolation.

Poverty and Health

Overall, the health of children in the United States is good. Eighty-eight percent of American children are reported to have a regular source of care. For 78%, the regular place of care was a private doctor's office; for 6%, the hospital. Poor children were, on the average, less likely to have a regular source of care and less likely to rely on private doctors. Sixty-four percent of children whose parents earned less than $5,000 saw a doctor during the year as contrasted with 74% whose family income was over $15,000. Poor children are more likely to use an outpatient department of a hospital. Care in a hospital outpatient department is not inherently better or worse than private care, but there is often no continuity of care or provision of preventive services (e.g., immunizations).

Strong relationships exist between family income and health indicators. Poor children are more likely to be in poor health or have handicapping conditions than children in families with adequate incomes. The poor are more likely also to develop communicable diseases. A nation-wide survey found that 74% of children, ages 6 to 11, whose families earned less than $5,000 were in need of dental care as opposed to 43% for children of families with incomes of $15,000 or more (see Exhibit 3.10).

The environment in which poor children live, frequently in conditions of bad sanitation and substandard housing, makes them much more likely to suffer rat bites, lead paint poisoning, and worms.

Exhibit 3.10. Persons 1-11 Years of Age Needing Dental Care, According to Age and Family Income: United States, 1971-74

Family Income	Age	
	1-5 years	6-11 years
Less than $5,000	21.2%	73.8%
$5,000-$9,999	19.2%	71.0%
$10,000-14,999	13.6%	62.2%
$15,000 or more	8.4%	43.3%

Source: National Center for Health Statistics. Health, United States: 1978. DHEW Publication(PHS) No. 79-55071 1978.

Mental Health of Children

Estimates of the prevalence of mental health problems in children range from 5% to roughly 30%. In 1975, 655,000 children under age 18 were admitted to an organized mental health facility. This represents 1% of the children in the United States. Children comprised approximately 8% of total inpatient admissions but 25% of total outpatient admissions. For children, ages 14 and under, 14,649 were admitted to inpatient facilities and 254,679 to outpatient psychiatric clinics. Admission rates for boys were 65% higher than those for girls in outpatient services, but only 9% higher in inpatient services.

Minority Children. Minority children are institutionalized in correctional facilities at a rate four times that of white children. However, minorities are institutionalized in medical and educational facilities at a rate only 20% higher than that of whites. The data raise important questions in terms of social attitudes toward methods of handling "problem behavior" in different cultural groups.

Identification of High Risk Child Population. Mental health experts suggest that children of poverty are at a particularly high risk for mental health problems. Data on admissions to outpatient facilities showed much higher rates (four times) of admission for children of female-headed families than husband-wife families. As mentioned previously, female-headed families have median incomes less than half those of husband-wife families.

Government Programs

The federal government provides funding for a wide variety of programs that improve children's health. New federally sponsored community mental health centers have

made help available where there was none before. In 1975, 23.2% of children under age 18, who used psychiatric help, were admitted to community mental health centers.

Medicaid, through matching funds given to states, can include a wide variety of services from inpatient hospital care to doctor visits for poor children. Included under Medicaid payments are funds for The Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT) initiated in 1967. By 1975, only 1.9 million of the 13 million eligible were screened. Successful programs have used outreach workers to locate children.

The school lunch and breakfast programs, administered by the Department of Agriculture, are some of the most comprehensive and important nutrition programs for children. In October 1975, 25 million children were eating school lunches, and 42% of those got their lunches free or at a reduced rate. One and nine-tenths million children were getting breakfast; 82.2% of those were served their breakfast free or at a reduced rate.

The Office of Maternal and Child Health provides grants to states for diagnostic and preventive services to women and infants within certain target areas and includes full prenatal care, care for delivery, postnatal care, and infant care.

Use of Medical Services

There are differences among population groups on the use of medical services. For example, only 59% of black women, compared with 77% of white women, began prenatal care during the first trimester of pregnancy. Black children reported the fewest number of doctor visits per person per year, regardless of family income. Minority populations used hospital outpatient and emergency rooms much more frequently than the white population. Blacks and Hispanics received considerably less dental care than whites. While more than half (53%) of whites reported one visit or more a year, only one-third of the blacks and one-third of the Hispanics reported a visit.

Changes in Views on Health and Nutrition

Two dramatic changes in views about health and nutrition have occurred recently. One, described by Julius B. Richmond, M.D., Surgeon General of the United States, is a change from health as an absence of illness to health as a positive concept. This shift requires a reexamination of current health policies and a change in the present 4% of the federal health dollar as prevention-related programs.

The second dramatic change is in seeing the role of styles of living and the environmental conditions as being more responsible for deaths than infectious diseases. The implications for infants and children extend from the way the mother eats, drinks, smokes, or uses drugs during pregnancy and the environmental hazards to which she is exposed – to the way she feeds her children (including breast feeding) and attempts to minimize environmental hazards, such as lead in wall paints, cleanliness, and so forth.

Clearly, the community needs to exert pressure to reduce environmental hazards such as air and water pollution.

Education

Trends in Enrollment

The total number of persons, ages 3 to 34, enrolled in school was 58.6 million in October 1978 – about 1.4 million lower than the number enrolled in 1977. Elementary education is almost universal. By 1978, over 98% of black children and white children, ages 5 to 13, were enrolled in school. The declining birth rate, however, has affected the actual number of children in elementary school. Enrollment in kindergarten through the eighth grade peaked in 1969. By 1978 enrollment was down 7%. Because of the large number of women currently reaching childbearing age, the school population is expected to increase again in the middle 1980s. Nursery school enrollment in October 1978, however, was significantly greater than in 1977. Enrollment has more than doubled in the last 10 years, despite a decline of 22% in the population 3 and 4 years of age – the main nursery school age. In 1978, 34% of all 3- and 4-year olds were enrolled in school; whereas, a decade earlier only 16% had been enrolled. This increase coincides with the increase in labor force participation of mothers, upgrading of the educational attainment of parents, and greater availability of nursery school facilities. It may also reflect a growing recognition by the nation of the advantages of early educational experiences.

Enrollments in kindergarten and elementary school, by contrast, reflect more the decline in births beginning in the 1960s. Thus, in 1968, there were 37.0 million children in kindergarten and elementary school, and only 31.5 million in 1978 (a drop of 5.5 million), even though the enrollment rates of 5- to 6-year olds increased from 90% to 95% and the enrollment rate for those 7 to 13 years old remained at close to 99%. While enrollment in both private and public schools has declined substantially since 1970, virtually all of the 1977-78 decline of 740,000 in the number in the elementary school was confined to public schools.

The same general trends in enrollment in preprimary programs occurred for both black children and white children. The enrollment rates differed, however, when age was considered: black 3- and 4-year-old children were more likely to be enrolled than their white counterparts. In contrast, the proportion of white 5-year-old children enrolled in preprimary schools was higher than the proportion of black children (see Exhibit 3.11).

Preprimary Enrollment and Working Mothers

Nursery schools and kindergarten programs were not intended philosophically or educationally to be a convenience for working parents. The relationship, however, is clear

Exhibit 3.11 Enrollment of Children 3 to 5 Years Old in Preprimary Schools by Race: October 1967 to October 1976

(Numbers in thousands. Civilian noninstitutional population.)

Race and age of child	1976		1973		1970		1967	
	Number of children	Percent enrolled	Number of children	Percent enrolled	Number of children	Percent enrolled	Number of children	Percent enrolled
ALL RACES								
Total, 3 to 5 years....	9,726	49.2	10,344	40.9	10,877	37.5	12,234	31.6
3 and 4 years old.....	6,238	31.3	7,000	24.2	7,096	20.5	8,075	14.2
5 years old.....	3,488	81.4	3,344	76.0	3,781	69.2	4,159	65.4
WHITE								
Total, 3 to 5 years....	8,008	49.1	8,698	40.5	9,029	37.8	10,280	31.8
3 and 4 years old.....	5,125	30.4	5,880	23.2	5,885	20.0	6,774	13.3
5 years old.....	2,884	82.3	2,817	76.6	3,144	71.1	3,505	67.4
BLACK								
Total, 3 to 5 years....	1,500	49.7	1,466	42.2	1,676	34.9	1,795	29.8
3 and 4 years old.....	967	34.5	1,013	28.8	1,097	22.8	1,191	17.7
5 years old.....	533	77.4	453	71.9	580	57.8	604	53.6

SOURCE: U. S. Bureau of the Census. Nursery school and kindergarten enrollment of children and labor force status of their mothers: October 1967 to October 1976. Current Population Reports, February, 1978, Series P-20, No. 318, p. 1.

between increased participation of mothers in the labor force and increased enrollments in preprimary programs. Between 1967 and 1976, both the proportion of children 3 to 5 years old with mothers in the labor force and the proportion of all children enrolled in preprimary programs increased. In 1967, 32% of young children had mothers in the labor force; by 1976, this proportion had increased to 42%. The enrollment rate of children with mothers in the labor force increased from about 18% to about 35%, while the enrollment rate of children with mothers not in the labor force increased from about 12% to about 29%. Also, as white women's labor force participation increased over the period, the participation of black women remained at about the same level, but the school enrollment rates of children of both races increased greatly. Clearly, enrollment rates, while enhanced by increased participation of women in the labor force, have increased for all children. The most recent data, October 1978, continue the same trends (see Exhibit 3.12).

The occupations of employed mothers also seem to have a significant effect on the proportion of children enrolled in preprimary programs. A larger proportion of 3- and 4-year-old children whose mothers were employed as white collar workers were enrolled than children whose mothers were employed in other occupations. Exhibit 3.13 presents the percentages and includes unemployed and not in labor force groups of women.

Exhibit 3.12 Preprimary School Enrollment of 3- to 5-Year Olds, by Age Group and by Labor Force Status of Mother: October 1978

Characteristic	Total		3-year olds		4-year olds		5-year olds	
	Enrolled	Enrolled all day	Enrolled	Enrolled all day	Enrolled	Enrolled all day	Enrolled	Enrolled all day
	Number in thousands							
All children	4,584	1,403	759	301	1,313	412	2,512	688
With mother in labor force	2,173	892	408	241	609	260	1,156	385
Employed full time	1,309	665	251	189	365	206	693	270
Employed part time	691	161	129	39	180	33	382	90
Unemployed	173	66	27	13	65	28	81	25
With mother not in labor force	2,286	471	319	45	668	137	1,299	289
Keeping house	2,145	418	285	31	631	122	1,229	265
In school	58	34	18	12	15	11	25	10
Other	83	20	16	2	23	4	45	14
No mother present	124	39	32	17	36		56	14
	Percent of age group							
All children	50.3	15.4	25.1	10.1	43.4	13.6	82.1	22.5
With mother in labor force	53.0	22.8	29.9	17.7	45.4	19.8	83.2	27.7
Employed full time	53.5	27.2	30.1	22.7	46.2	26.2	84.3	32.9
Employed part time	53.6	12.5	31.1	9.3	42.7	7.7	84.2	19.7
Unemployed	48.0	18.3	23.7	11.8	48.9	20.8	71.7	21.9
With mother not in labor force	47.8	9.8	20.1	2.9	41.6	8.6	81.6	18.1
Keeping house	47.7	9.2	19.3	2.1	41.4	8.0	81.8	17.7
In school	59.2	34.7	50.9	35.0	42.3	32.3	91.8	37.3
Other	44.2	10.6	20.9	2.2	44.7	8.8	72.0	22.1
No mother present	54.7	17.3	48.5	24.6	46.1	10.2	71.0	17.7

NOTE: Details may not add to totals because of rounding.

SOURCE: U. S. Department of Commerce, Bureau of the Census, unpublished tabulations.

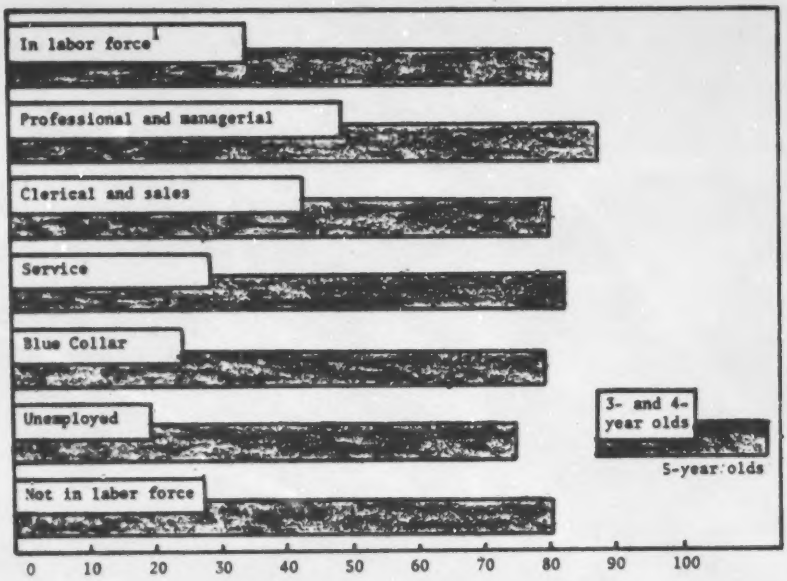
Head Start and Day Care

Head Start and day care programs are not generally included in Bureau of the Census statistics or in studies of the National Center for Educational Statistics (NCES). Yet, Head Start has a clear educational component, and the Federal Interagency Day Care Regulations, now being revised, include an educational component. These are child development and child care programs and should be included in any presentation of the educational conditions of children. The 1980 edition of NCES, *The Condition of Education,* will in fact include both Head Start and day care data.

Head Start is a comprehensive preschool program that includes medical, nutritional and educational components, and social services. It is targeted toward low income children generally from 3 to 5 years of age and requires parent participation. In fiscal year

Exhibit 3.13 Percent of Children 3 to 5 Years Old Enrolled in Nursery School and Kindergarten by Labor Force Status and Occupation of Mother: October 1976

(Civilian Noninstitutional Population)



[1]Farm workers are included in total, not shown separately.

SOURCE: U. S. Bureau of the Census. Nursery school and kindergarten enrollment of children and labor force status of their mothers: October 1967 to October 1976. Current Population Reports, February 1978, Series P-20, No. 318, cover.

1978 (FY 1978), more than 400,000 children (about one-fourth of all preschoolers living in poverty) were participants. By law, at least 10% of all children enrolled in project Head Start must be handicapped. Annual total costs for Head Start are around $700 million.

Day care programs serve the needs of poor and near poor populations, and their use is related directly to parent participation in the labor market or job training. Differential use is further related to specific subgroups. For example, a preschool child with a single, employed parent is about 30 times more likely to be enrolled in a day care center than a child in a two-parent family in which only one is employed. Further, the child of a single, employed parent is more than twice as likely to use a day care center than the child in a two-parent household in which both parents work. However, the kind of child care selected seems to be affected by race/ethnicity. For example, Hispanic-Americans are four times more likely to have children cared for by relatives than by nonrelatives. Blacks are more than twice as likely to use relatives rather than nonrelatives, while whites are only slightly more likely to use relatives instead of nonrelatives in the private home setting.

The use of private homes for child care arrangements needs to be considered when discussing day care. As of 1975, more than 85% of all child care arrangements were made

in private homes. One-half of all children were taken care of by their relatives, and more than one-third were in private homes but cared for by nonrelatives. Day care centers and nursery schools accounted for less than 10% of the children who were cared for by someone other than the parents (see Exhibit 3.14).

The use of day care centers is influenced by funding, status of center, and background characteristics of the children. Exhibit 3.15 describes the use of centers during 1976-77.

Exhibit 3.14. Methods of Care for Children Under 14 Years Old Utilized by Families Using More Than 10 Hours of Nonparental Care a Week, 1975, in Percentages

Method of Care	Percent
Care by Relative	
in child's home	22.5
in other home	27.2
Care by Nonrelative	
in child's home	20.9
in other home	16.6
Nursery School	5.8
Day-Care Center	3.6
Other	3.4
Total	100.0

Source: Unco, Inc. National Childcare Consumer Study: 1975. Prepared for Department of Health, Education, and Welfare. Office of Child Development (1975), Vol. II, Table IV-2, p. 4-3.

A federally supported study found that government subsidized centers differed from for-profit day care centers, in that the for-profit centers had fewer caretakers for equal numbers of children, paid their employees lower wages, and offered fewer supplementary services that could benefit children's overall development. Not surprisingly, the for-profit centers were operated more cheaply than the government subsidized centers.

In FY 1977, direct and indirect expenditures by the federal government totaled $2.3 billion. Direct federal programs costing $1.8 billion served 2.8 million children, mostly in poor and near-poor families. Their purpose was to increase the quantity and quality of

Exhibit 3.15 Day Care Center Enrollment by Funding, Status of Center, and Background Characteristics of Children: 1976-77

Characteristic	All centers	Funded[1] centers		Nonfunded[1] centers	
		Profit	Non-profit	Profit	Non-profit
	Percentage distribution				
Annual family income					
Total	100	100	100	100	100
Less than $6,000	30	32	55	5	24
$6,000 to $15,000	43	45	36	45	48
More than $15,000	27	24	8	49	28
Race					
Total	100	100	100	100	100
White	63	74	44	81	67
Black	28	21	44	13	26
Other	9	5	12	6	7
Type of family					
Total	100	100	100	100	100
Two-parent	62	59	47	75	70
Single-parent	38	41	53	25	30

[1]Denotes centers that enroll at least one child whose care is paid for at least in part by government funds.

SOURCE: Abt Associates, Inc. Day Care Centers in the United States: A National Profile 1976-77, sponsored by U. S. Department of Health, Education, and Welfare, Administration for Children, Youth, and Families, 1979.

preschool programs and day care centers. Indirect support is provided to middle and high income families through a credit on their federal income tax for work related child care expenses.

The largest number of children, 800,000, receive federal child care support through social services grants to the 50 states under Title XX of the Social Security Act. Both low and moderate income families may be subsidized for child care in day care centers and family based arrangements that meet federal standards.

School Progress and Failure

Progress in school, measured by whether or not the child is in the correct grade for his or her age, has increased. Progress for black children was greater than that for the general population. In 1950, 37% of 10-year-old black children were in a grade lower than

usual for their age. In 1976, only 7% of all 10-year-old black children were in this situation.

Although the proportion of all children who were behind in their school progress declined greatly between 1950 and 1970, significantly higher rates of students behind in school existed for some population subgroups. The level of education received by parents and family income seem to play a large role in achievement. Among 5- to 13-year olds, for instance, comparisons of children whose parents had equivalent educational attainment levels do not reveal significant differences between black children and white children or between the Spanish origin children and the total population. Similarly, relatively high proportions of children who were living in families below the poverty level — whether white, black, or of Spanish origin — were behind in school. A number of government programs have attempted to address these discrepancies and inequalities.

Government Educational Programs

In 1978, the federal government's share of funds for elementary and secondary education was 8% of the total expenditures in the United States, or an estimated $6.5 billion. This represents a decrease from 1977, in both the federal share and the absolute amount allocated.

Federal educational programs for children are funded mainly through the Elementary and Secondary School Act. Programs under this Act, especially Title I, are targeted primarily toward educationally disadvantaged children. Ninety percent of the schools with over half their students from poverty families receive funding under Title I. In all, Title I serves 6 million children at a cost of about $2 billion per year. Fifty-four percent to 60% of Title I recipients are white, another 35% are black, and the remainder are predominantly Spanish surnamed.

A major focus of the Title I program for disadvantaged students is on reading. Eighty-two percent of Title I students receive remedial reading instruction. A typical Title I student spends 5½ hours per week in compensatory instruction — an amount that represents one-fifth to one-fourth of his or her total school time available for instruction. Educationally disadvantaged children usually lose ground to their more advantaged peers as they progress through school. Poor readers who receive extra attention because of Title I, however, tend to hold their relative position between fall and spring semesters, with some evidence of loss over the summer months. Moreover, Title I students tend to develop favorable attitudes toward themselves and their reading activities to a degree that was equal to or greater than that of their less needy, unassisted peers.

Other Title I programs for children include special funding for children of migrant workers, children in institutions because of neglect and delinquency, and bilingual education. Funds are supplied also for support services such as libraries and learning centers. In addition to programs for children from families with low incomes, there are more recent programs for handicapped children.

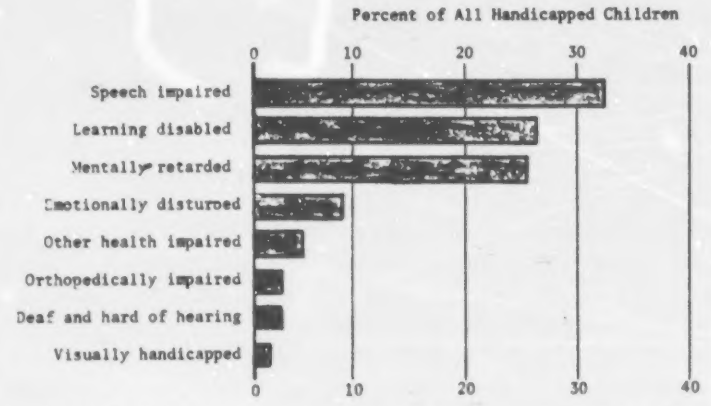
New Program for Handicapped Children

In November 1975, Congress passed the Education for All Handicapped Children Act (Public Law 94-142), which established the goal of finding all school age handicapped children in the United States and providing them with a free, appropriate public education by September 1978.

Requirements of Public Law 94-142. The Act specifies a number of activities that schools must engage in to ensure that handicapped children receive a free, appropriate public education. The Law requires specialists to evaluate the needs of the children and to determine the most appropriate educational environment for the child. The Law also requires that an individualized educational program be developed for each child identified as needing special education or related services. The Act requires schools to notify parents, to include them in the decision making process, and to provide them with an opportunity for a hearing if they are dissatisfied with the decision. Further, the Act asks that, to the extent possible, each handicapped child be educated with nonhandicapped children.

Kinds of Children Served. Children eligible for support under Public Law 94-142 include children who are mentally retarded, speech impaired, deaf, hard of hearing, visually handicapped, orthopedically impaired, seriously emotionally disturbed, learning disabled, and those who are subject to other health impairments that cause them to require special education or related services. The number of children identified as having various handicapping conditions is shown in Exhibit 3.16. Three kinds of handicaps account for over 80% of the children: speech impairments, mental retardation, and learning disabilities.

Exhibit 3.16 Distribution of Children Served by Handicapping Condition, School Year 1977-78[1]



[1]The data displayed include handicapped children counted under Public Laws 89-313 and 94-142.

SOURCE: U. S. Office of Education. Progress toward a free appropriate public education. Washington, D. C.: DHEW Publication No. (OE) 79-05003, January 1979.

Since speech impairments tend to be identified in earlier grades and often are corrected, the incidence of handicapped children in elementary schools, therefore, may be greater than at higher grade levels. Thus, the percentage of children served in elementary schools is probably greater than at other grade levels.

States that agree to meet the requirements of the Act are provided fiscal assistance in the form of a formula grant that is based on the number of handicapped children, ages 3 through 21, they report serving. A second source of fiscal assistance provided by the Act is a preschool incentive grant that is designed to promote state and local services to preschool children, ages 3 through 5. For the school year 1979-80, the states will receive approximately $214 per handicapped child, ages 3 through 21; and, in addition, approximately $80 per handicapped child, ages 3 through 5. Head Start, by contrast, has been including 10% handicapped children in its programs and has absorbed the related costs, or, in fact, has utilized other public programs including Public Law 94-142.

Bilingual Education

The Bilingual Education Act, ESEA Title VII, passed in FY 1968 with no appropriation. In FY 1969, $7.5 million were appropriated. The rate of appropriation has increased steadily until it was $150 million in FY 1979. The basic programs consist of: bilingual education programs in elementary or secondary schools, training programs for bilingual education personnel, preschool bilingual education programs, and adult bilingual education programs.

In terms of student participation, it has been estimated that approximately 80% of the students enrolled in bilingual education are of Hispanic origin, and less than half of the total number of limited-English-speaking children are being served. The impact on students in grades 2 through 6 so far has been insignificant. They achieve in English language arts more poorly than children not in the program, and achieve equally well in mathematic computation. The scores are between the 20th and 30th percentile.

Educational Programs for Migrant Children

As part of Title I, ESEA, the Migrant Educational Program began with an appropriation of $41.6 million in FY 68 and reached $173.5 million in FY 79. The growth of the program, from 121 projects in 1967 serving approximately 43,000 students to 2,900 projects in 1977 serving approximately 468,000 students, indicates that the target population is being identified and served. There are no clear results on the impact of the program on children's educational performance.

Television

The most powerful source of education other than the school and the home is

television. Ninety-seven percent of all American households own television sets. By the time students graduate from high school, they have averaged 11,000 hours in the classroom and 15,000 hours in front of the television.

A CBS poll of parents found that television, in general, was viewed as having a negative effect on their children's education, but children's programming was seen quite positively.

Most children watch both children's and adults' programming. An ABC study, of 9- through 14-year-old children in the state of Kansas, found that on school days the average child watches 3½ hours of television from late afternoon through evening. Between 6 P.M. and 8 P.M., 60% of the children sampled watched TV. More than 80% of the parents sampled in the same study said that they did not try to advise their children on which programs were best.

Many studies indicate that preschool children are influenced most by television's messages. They have great difficulty distinguishing between truth and fiction, and their perceptions of reality beyond their immediate family often are determined by what television portrays. The particular susceptibility of younger children has led some to advocate government or industry restriction on violence in programming and the amount of advertising. Others say that the problem can be rectified if parents will become more assertive in screening what their children watch.

Television is viewed by scholars as a potential contribution to children's education, but many believe that television, as it has developed in the United States, is far from that potential. Others note that television, a passive activity, has become a substitute for reading for many children.

BIBLIOGRAPHY

American Humane Association and Denver Research Institute. *National analysis of child neglect and abuse reporting, 1977: Annual statistical report.* Englewood, Colorado, February 1979.

Bane, M.J. Marital disruption and the lives of children. *Journal of Social Issues,* 1976, 32(1).

Beckwith, B.J. *The sudden infant death syndrome.* Washington, D.C.: U.S. Department of Health, Education, and Welfare, DHEW Publication No. (HSA) 78-5251, 1978.

Belsky, J., & Steinberg, L.D. What does research teach us about day care? A follow-up report. *Children Today,* July-August, 1979.

Bettelheim, B. *The uses of enchantment: The meaning and importance of fairy tales.* New York, New York: Random House, 1976.

Boston Women's Health Book Collective. *Ourselves and our children.* New York, New York: Random House, 1978.

Children's Defense Fund. *For the welfare of children,* 1978. Available from: Children's Defense Fund, 1520 New Hampshire Avenue, N.W., Washington, D.C. 20036.

Coelen, C. et al. *Day care centers in the U.S.: A national profile 1976-1977.* Cambridge, Massachusetts: Abt Associates, 1977.

Congress of the United States. *Child care and pre-school: Options for federal support.* Washington, D.C.: Congressional Budget Office, 1978.

Dearman, N.B., & Plisko, V.W. *The condition of education: Statistical report, 1979.* Washington, D.C.: National Center for Educational Statistics, 1980. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 017-080-02008-4.

DeLone, R.H. *Small futures.* New York and London: Harcourt Brace Jovanovich, 1979.

DeLone, R.H. *All our children: The American family under pressure.* New York and London: Harcourt Brace Jovanovich, 1977.

Espinoza, R., & Newman, Y. *Step-parenting.* Washington, D.C.: U.S. Department of Health, Education, and Welfare, DHEW Publication No. (ADM) 78-579, 1979.

Family Economics Review. Washington, D.C.: U.S. Department of Agriculture, Summer 1979; Winter 1979.

Federal Communications Commission. Children's television programs. *Federal Register,* 1974.

George, P. Testing: The competency controversy. *Southern Exposure,* 1979.

Grotberg, E.H. (Ed.). *200 years of children.* Washington, D.C.: U.S. Department of Health, Education, and Welfare, DHEW Publication No. (OHD) 77-30103, 1977.

Hopwood, N.J., & Becker, D.J. Psychosocial divorcism: Detention, evaluation and management. *Child Abuse and Neglect,* 1979, 3(2).

Jenkins, S. Children of divorce. *Children Today,* March-April 1978, 7, 16-20.

Kempe, H.C. Recent developments in the field of child abuse. *Child Abuse and Neglect,* 1979, 3(1).

Kittrell, E. Child and television. *Children Today,* May-June 1978.

Knitzer, J., & Allen, M.L. *Children without homes: An examination of public responsibility to children in out-of-home care,* 1978. Available from: Children's Defense Fund, 1520 New Hampshire Avenue, N.W., Washington, D.C. 20036.

McNeese, M., & Hebeler, J. The abused child. *Clinical Symposia,* November 5, 1977, 29.

National Academy of Sciences. *Toward a national policy for children and families.* Washington, D.C.: National Academy of Sciences, 1976.

Rosen, B.M. *An overview of the mental health delivery system in the United States and services to children,* 1977.

Shyne, A.W., & Schroeder, A.G. *National study of social services to children and their families.* Washington, D.C.: U.S. Department of Health, Education, and Welfare, DHEW Publication No. (OHDS) 78-30149, July 1978.

Stack, C.B. *All our kin: Strategies for survival in a black community.* New York, New York: Harper and Row, 1975.

Straus, M. Family patterns and child abuse in a nationally representative American sample. *Child Abuse and Neglect,* 1979, 3(1).

U.S. Bureau of the Census. Characteristics of American children and youth, 1976. *Current Population Reports,* 1979, Series P-23, No. 66.

_____. Relative progress of children in school: 1976. *Current Population Reports,* April 1979, Series P-20, No. 337.

_____. School enrollment – Social and economic characteristics of students: October 1978. *Current Population Reports,* October 1979, Series P-20, No. 346.

_____. Characteristics of the population below the poverty level: 1977. *Current Population Reports,* 1979, Series P-60, No. 119.

_____. Divorce, child custody, and child support. *Current Population Reports,* 1979, Series P-23, No. 84.

_____. Nursery school and kindergarten enrollment of children and labor force status of their mothers: October 1967 to October 1976. *Current Population Reports,* February 1978, Series P-20, No. 318.

U.S. Bureau of Labor Statistics. *Children of working mothers, March 1977.* Force Report 217. Washington, D.C.: U.S. Department of Labor, 1978.

_____. *Divorced and separated: Women in the labor force – An update.* Force Report 220. Washington, D.C.: U.S. Department of Labor, 1978.

_____. *Women who head families: A socioeconomic analysis.* Force Report 213. Washington, D.C.: U.S. Department of Labor, 1978.

U.S. Department of Health, Education, and Welfare. *Statistical highlights from the national child care consumer study.* Washington, D.C.: DHEW Publication No. (OHD) 76-31096, 1976.

_____. *Parents' guide to childhood immunization.* Washington, D.C.: DHEW Publication No. (OS) 77-50058, 1977.

_____. *The persistence of preschool effects: A long-term follow-up of 14 infant and preschool experiments.* Washington, D.C.: DHEW Publication No. (OHDS) 78-30130, 1977.

_____. *Alcohol and your unborn baby.* Washington, D.C.: National Institute on Alcohol Abuse and Alcoholism. DHEW Publication No. (ADM) 78-521, 1978.

_____. *Annual evaluation report on programs administered by the U.S. Office of Education.* Washington, D.C.: Office of Planning, Budget, and Evaluation, 1978.

_____. *Health: United States, 1979.* Washington, D.C.: DHEW Publication No. (PHS) 80-1232, 1979.

_____. *Progress toward a free appropriate public education.* Washington, D.C.: U.S. Office of Education, DHEW Publication No. (OE) 79-05003, 1979.

_____. *Healthy people: The Surgeon General's report on health promotion and disease prevention.* Washington, D.C.: DHEW Publication No. (PHS) 79-55071, 1979. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 017-001-00416-2.

_____. Child and family health: Special section. *Child and Family Health,* September-October 1979, 94(5).

CHAPTER 4

STATUS OF YOUTH

Introduction

In modern America, all stages of life are times of change, of transition. This is true especially for America's youth, who, in addition to responding to changes in the society around them also must cope with physical and emotional changes in their bodies. They also must traverse the latter stages of what, for most of them, has been a seemingly life-long educational experience. Further, they must prepare for and enter into the nation's work force. Finally, most of them gradually, or suddenly, will assume new independence and responsibilities as wives, husbands, and parents in their households.

The changes are many; the opportunities – and barriers – are varied; and while much goes right, more than a little goes wrong.

This discussion of the status of youth in 1979 will center on three areas: health, education, and employment. Treatment of these three core domains will be preceded by a brief overview of changes in the youth population of the last decade, and will be followed by discussion of a number of special youth problems that give rise to some concerns for the well-being of America's young people.

Change in Youth Population from 1970 to 1979

Although levels of fertility, mortality, and immigration all affect the age structure of the population, the most substantial changes in recent years have been caused by fluctuations in the annual numbers of births – the baby boom of the 1950s and early 1960s and the subsequent baby bust (see Exhibit 4.1). The annual number of births rose sharply immediately after the Second World War, peaked in 1957 at 4.3 million, and declined to 3.5 million in 1968. After a slight increase in 1970 to 3.7 million, the number of births decreased again and stayed between 3.1 million and 3.2 million from 1973 to 1976. Children born during the baby boom now comprise the late adolescent and young adult population.

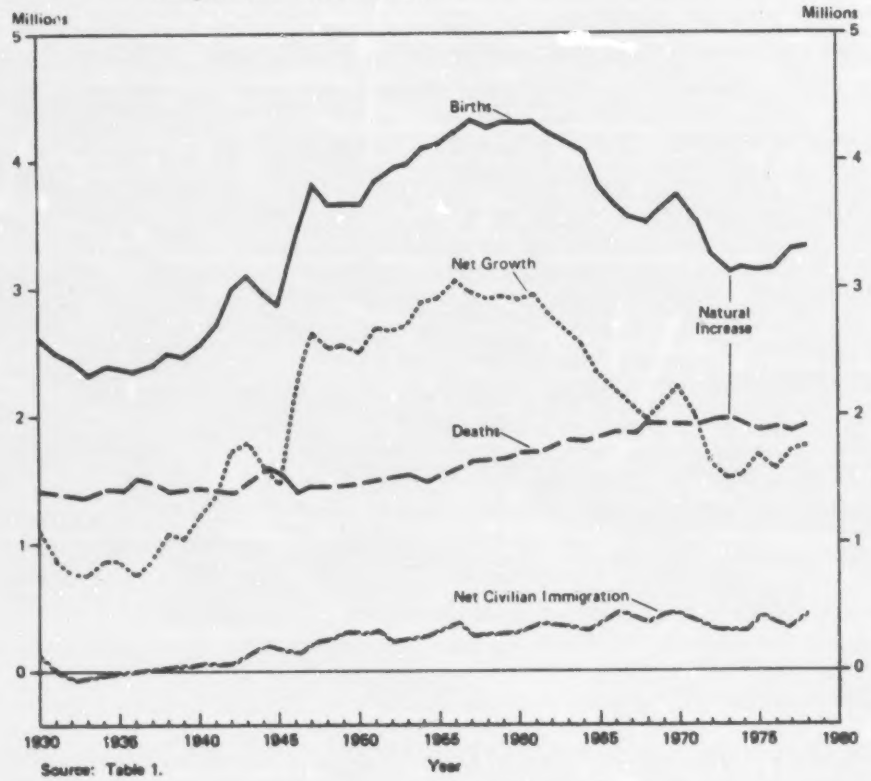
Shifts in the sizes of various age groups may have dramatic implications for societal institutions and programs. The number of children under age 5 increased from fewer than 11 million in 1940, to 16 million in 1950, and to 20 million in 1960. Since then it has declined to 17 million in 1970 and 15 million in 1978. As these children have aged, the number of elementary school age children has shown a similar pattern of growth and decline, reaching a peak in 1969. As a result, some communities now find themselves with empty classrooms and have little prospect of filling them in the near future.

In contrast, the number of youth and young adults has grown tremendously over the last 3 decades. In 1950, there were 16 million persons 18 to 24 years old; by 1970 there

were 25 million; and by 1979, over 29 million. While these persons often experienced overcrowding as they passed through elementary and secondary school, they now have to compete with a large number of their peers for jobs and places in colleges and graduate schools. Exhibit 4.2 presents age distribution profiles of the population of the United States for the years 1970 and 1979. The contrasting bulges near the bottoms of the profiles for the 2 years, with maxima at age 10 for the 1970 profile and at age 20 for the 1979 profile, illustrate the shifts in age distribution as the children of the baby boom grow older. Effects of this large population cohort will be encountered in many areas over the next years and decades. Already they are adding, for example, to the greatly increasing demands for family housing.

Among minority groups, it must be noted that throughout the 1970s the number of blacks, 18 to 24 years of age, has increased at almost twice the rate of whites in that age group.

Exhibit 4.1 Annual Levels of Net Growth, Births, Deaths, and Net Immigration: 1930 to 1978

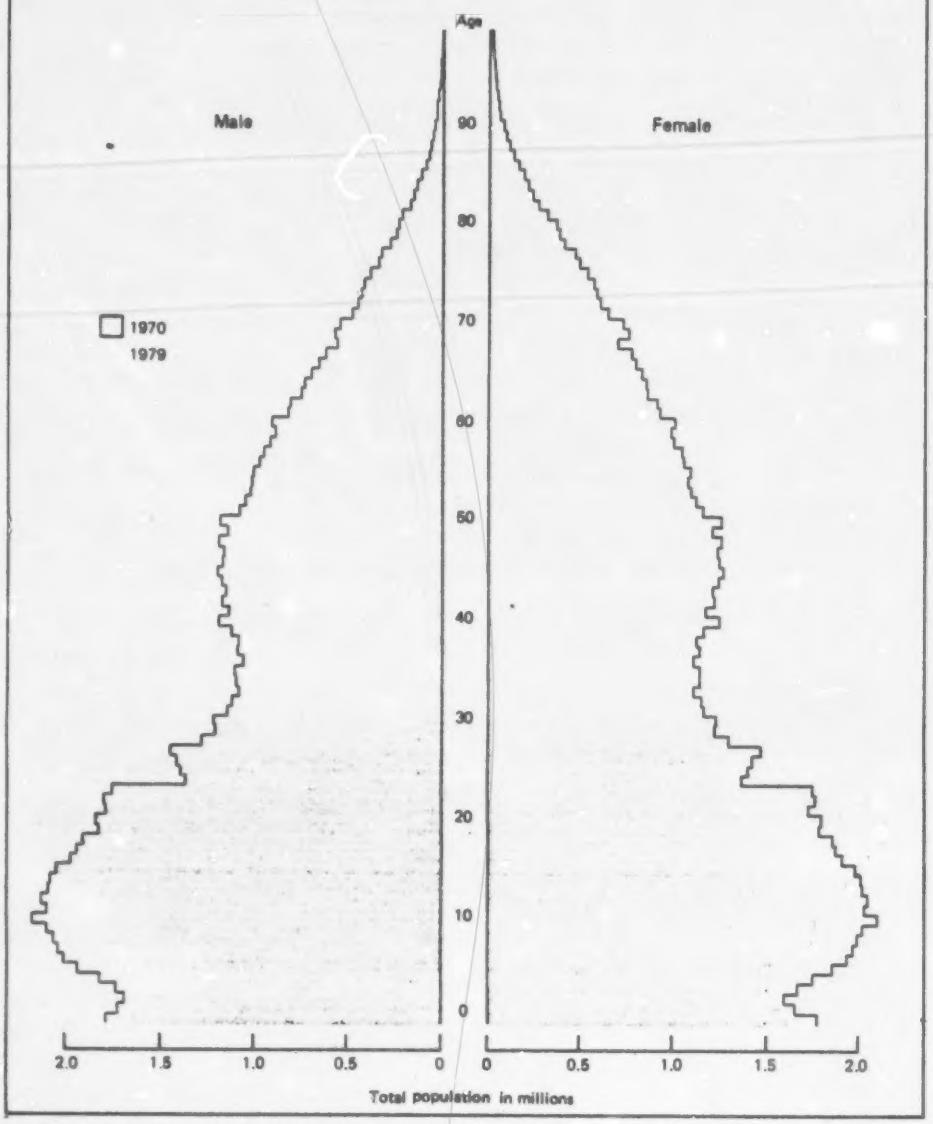


Source: U. S. Bureau of the Census. Estimates of the population of the United States and components of change: 1940 to 1978. Current Population Reports, May 1979, Series P-25, No. 802.

Exhibit 4.2

Figure 2. Distribution of the Total Population, by Age and Sex: April 1, 1970, and July 1, 1979

(Including Armed Forces overseas)



Source: U. S. Bureau of the Census. Estimates of the population of the United States by age, race, and sex: 1976 to 1979. Current Population Reports, January 1980, Series P-25, No. 870.

Health of Adolescents and Young Adults

Adolescence is a period of complex changes – in physical growth and maturation as well as in transition from childhood dependency to adult autonomy. In health, it is a relatively good period as measured by the usual mortality and morbidity indicators.

Youth Mortality

Although the death rate for the 40 million young Americans in the 15 to 24 age group is 2.5 times the rate for children, it is substantially below that for other age groups. Yet, while health for this age group, as for others, is considerably better than 75 years ago (see Exhibit 4.3), there is one startling difference: for adolescents and young adults, recent progress has not been sustained, as it has been for other age groups.

Americans, ages 15 to 24, now have a higher death rate than 20 years ago. In 1960, the adolescent/young adult mortality rate was 106 deaths per 100,000 population. By 1970, the rate was up to 128. By 1976, it had dropped to 113 – but 1977 statistics show an increase again to 117. This represents nearly 47,000 deaths in 1977 alone.

Young men are at particular risk – their death rate is almost three times that of young women. And, although chronic diseases are not among the major causes of death at this period of life (see Exhibit 4.4), the lifestyles and behavior patterns that are shaped during these years may determine later susceptibility to chronic diseases.

Traumatic Deaths

Accidents, homicides, and suicides account for about three-fourths of all deaths in the 15 to 24 age group. Responsibility has been attributed to behavior patterns characterized by judgmental errors, aggressiveness, and, in some cases, ambivalence about wanting to live or die. Certainly, greater risk taking occurs in this period of life.

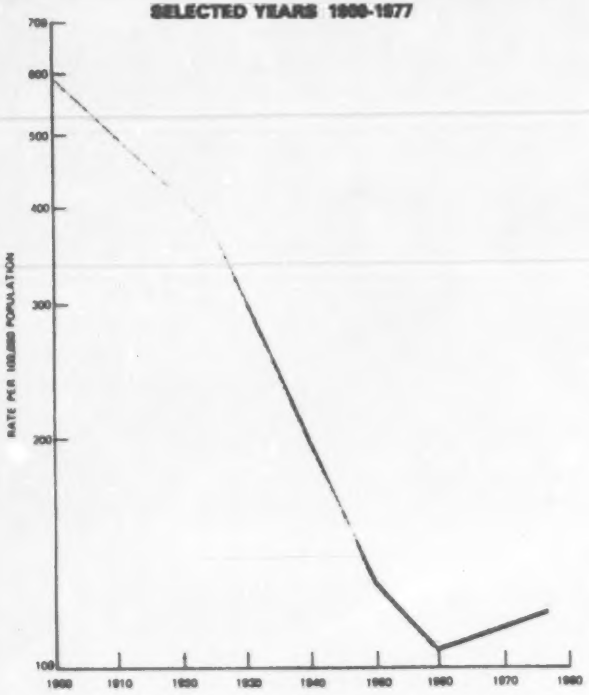
The variability of these traumatic deaths by sex and race is striking. All kinds of deaths are three to four times more frequent for males than for females. While motor vehicle accident deaths are more likely to occur among white youths, young blacks of either sex are at least five times as likely to be murdered; homicide is the leading cause of death for young blacks, ranking slightly ahead of total accidents.

Certainly, injury control must be a clear health promotion priority for young people, but the task will not be easy. Injury rates are linked to factors – lifestyle and socioeconomic – not usually addressed by health programs. Equally difficult will be bringing about reduction in misuse of alcohol and drugs, which contribute greatly not only to injuries, homicides, and suicides but also to other problems of young people in a stressful society.

Fatal Motor Vehicle Accidents. In 1977, fatal motor vehicle accidents were the leading cause of mortality in the 15- to 24-year age group, accounting for 37% of all

Exhibit 4.3

DEATH RATES FOR AGES 15-24 YEARS: UNITED STATES, SELECTED YEARS 1900-1977



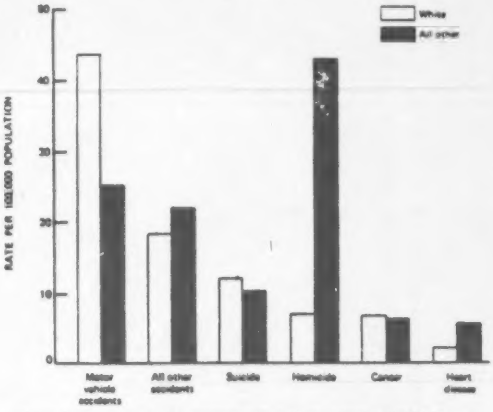
NOTE: 1977 data are provisional; data for all other years are final. Selected years are 1900, 1920, 1940, 1960, 1977.

Source: National Center for Health Statistics, Division of Vital Statistics.

Source: U. S. Department of Health, Education, and Welfare. Healthy people: The Surgeon General's report on health promotion and disease prevention, 1979.

Exhibit 4.4

MAJOR CAUSES OF DEATH FOR AGES 15-24 YEARS: UNITED STATES, 1976



Source: Based on data from the National Center for Health Statistics, Division of Vital Statistics.

Source: U. S. Department of Health, Education, and Welfare. Healthy people: The Surgeon General's report on health promotion and disease prevention, 1979.

deaths. Although a complex interaction – of driver, vehicle, and roadway – determines the risk of accidents, nevertheless, a teenage or young adult driver, who is involved in a traffic accident, is twice as likely to die as a driver 25 years old or over.

Alcohol consumption clearly is implicated in many of the fatalities. About half of fatally injured drivers have been found to have blood alcohol concentrations of more than 100 mg/dl (100 milligrams of alcohol per deciliter of blood). In most states, this is considered presumptive evidence of intoxication. Blood alcohol levels even lower than 100 mg/dl increase the likelihood of an accident – especially for teenagers, the elderly, and others particularly sensitive to alcohol. Young people also place themselves at greater risk by driving while under the influence of marijuana or other drugs.

The attitudes of young people about risk are significant. While excessive speed was a factor in 35% to 40% of all vehicular fatalities in 1977, it was an influence in almost half of those involving teenagers, ages 15 to 19.

Motorcycle accidents killed more than 4,000 Americans in 1977 – 30% of whom were under age 20. Motorcyclists, because they have so little protection, have a seven times greater chance of fatal injury for each mile driven than do automobile drivers. And, more frequently than automobile accidents, motorcycle accidents cause severe, permanent head injuries leading to paralysis.

Homicide. Murder accounts for over 10% of all deaths among adolescents and young adults – just under 7% for whites but almost 30% for blacks in this age group. In 1977, when an estimated 21,000 Americans were victims of homicide, about 25% were ages 15 to 24, placing that group at greater risk than the rest of the population.

The American homicide rate greatly exceeds that of most other industrialized nations. Our rate of 10.2 homicides per 100,000 people in 1974 compares with a rate of only 0.9 for France, 1.0 for Great Britain, 1.1 for Sweden, and 1.3 for Japan.

In about 20% of murders in this country, victim and offender are relatives or have a close relationship; in 40%, they are acquaintances; and in the remaining 40%, there is no known relationship. An estimated 60% to 80% of homicides occur as the result of personal disagreements and conflict; while robbery, sexual assault, and other circumstances account for the rest.

Many factors undoubtedly are involved in our high homicide rate. Economic deprivation, family breakup, violence glamorizing in the media, and handgun availability all are important. Firearms, the most frequently used homicide weapon in the United States, were involved in 63% of the murders occurring in 1977, with handguns used in half, and cutting or stabbing weapons employed in 18%.

Easy access to firearms appears to be one factor with a striking relationship to murder. From 1960 to 1974, handgun sales quadrupled to more than 6,000,000 a year. During that same period, the homicide rate increased from 4.7 per 100,000 to 10.2 for the overall population – and from 5.9 to 14.2 for young people, ages 15 to 24.

Suicide. Suicide is the third leading cause of death among teenagers and young adults, some 5,600 of whom took their lives in 1977. Of total suicides, 20% are committed by people under age 25. Among adults, three times as many men as women commit suicide, and adolescent males are more likely than adolescent females to take their lives.

The most frequent suicide weapons include firearms, drugs, and motor vehicle exhaust gases. Firearms are used four times as often as poisoning (the second most

frequent method), and firearm suicides have been increasing at a much faster rate than suicides by other means.

Unfortunately, the suicide rate among young people has not plateaued but is increasing. In 1950, the rate was only about 20% of what it reached in 1977. In 1976, more than 1 of every 10 teenagers and young adults who died committed suicide.

Most suicidal persons give verbal or behavioral warning first, and 80% of those who take their lives have made previous attempts. There is a prime need for hotlines and prompt referral to sources of professional help when problems are noted.

Sexually Transmissible Diseases

Although there has been some recent improvement, overall, in the incidence of gonorrhea and syphilis, both diseases continue to increase among adolescents. Moreover, sexually transmissible diseases – such as genital herpes and nonspecific urethritis – recently have become recognized as major health problems. Along with gonorrhea and syphilis, they account for an estimated 8 million to 12 million cases of sexually transmitted diseases a year. The greatest risk of acquiring them occurs among young people, ages 15 to 24, who account for about 75% of all cases.

Because infection often is unrecognized for lack of apparent symptoms, many young people also suffer serious permanent complications. Each year, an estimated 75,000 women of childbearing age become sterile as a result of pelvic inflammatory disease caused by a sexually transmitted infection.

Federal Health Goals for Youth

In Chapter 1 the nation's first health revolution was discussed – the struggle against infectious diseases that spanned the late 19th Century and the first half of the 20th Century. That revolution has run its course successfully, at least in the United States and in most other industrialized countries. So successful was the first revolution that, today, only 1% of people. who die before the age of 75 in the United States, die from infectious diseases.

The success of that first revolution means that, today, the pattern of killing and disabling diseases has shifted dramatically. While death from the major acute infectious diseases plummeted from 1900 to 1970, the proportion of mortality from major chronic diseases, such as heart disease, cancer, and stroke, increased more than 250%. Typically, deaths from these chronic diseases occur among older persons, those whose adolescence is behind them. Evidence is accumulating that death rates from chronic diseases, in part, are a function of individual lifestyles. Decreases in these death rates will depend on attainment of more healthful individual lifestyles – proper nutrition; appropriate exercise; caution in use of alcohol, tobacco, and other drugs; and so forth.

This shift in causes of deaths, along with data presented earlier showing that three

out of four deaths in the 15 to 24 age group are the consequence of traumatic episodes (accidents, homicide, and suicide), suggest that federal goals in regard to youth health should have two major emphases. The first and most obvious is to reduce traumatic episodes, particularly motor vehicle accidents, through a variety of efforts, ranging from straightforward traffic safety campaigns to mental health programs aimed at decreasing overly aggressive and self-destructive behavior. The second is to lead youth to adopt lifestyles that will enable them to maintain good health even into their advanced years. Both objectives are implicit in the health goal for American adolescents and young adults recently set by the Surgeon General of the United States: To improve the health and health habits of adolescents and young adults, and, by 1990, to reduce deaths among young people, ages 15 to 24, by at least 20%, to fewer than 93 per 100,000.

Conditions and Trends in Education

If any event in American life qualifies for the label "rite of passage," it is high school graduation. Three out of four adolescents pass through this critical ordeal. Before high school graduation, for 9 months of the year, waking hours of youth typically are centered on the classroom, in which students are engaged in programs over which they have relatively little control. After graduation, individual choices must be made — work, preparation for work, more formal education, or sometimes all three.

For most youth, then, high school graduation is a major change point. Decisions made at this time often have lifelong career and familial consequences. One difficulty in making these decisions is that the individuals affected often are in the process of rapid personal growth and change. An added difficulty, and an occasion for risk, is that the decisions must be made against a background of changing conditions in education and society. Significant among these societal changes in 1979 was a continuing decline in the size of the school-age population.

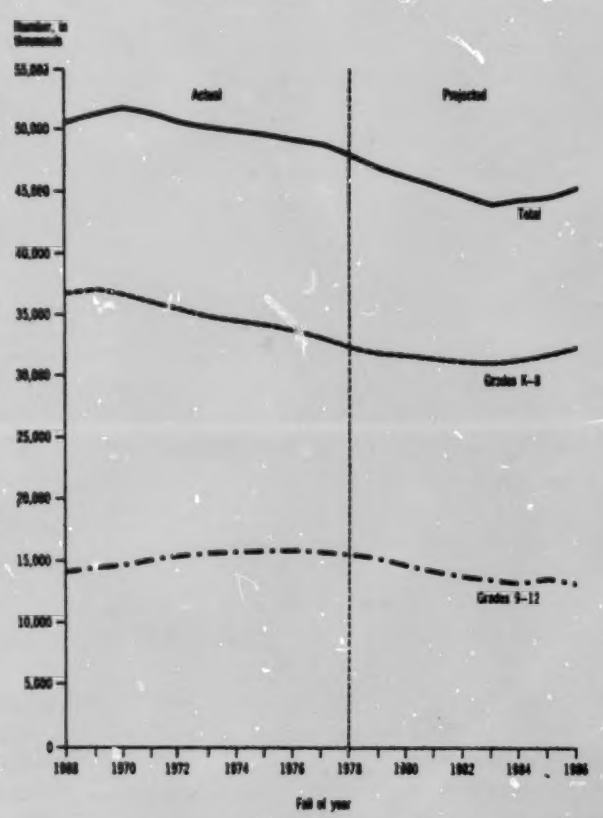
Enrollment in Secondary Education

Declining birth rates initially affected enrollments in elementary schools beginning in 1970. Enrollment declines did not begin in the secondary schools until 1977. From a high of 15,723,000 students in grades 9 through 12 in 1976, the decline is projected to continue at least through 1986, when an enrollment of only 13,212,000 is forecast (see Exhibit 4.5).

For two reasons, care must be taken in any discussion of the effect of declining enrollments in education planning. First, changes in the school-age population do not occur evenly across the nation, either among or within states. Some states are experiencing increases in enrollment even while overall enrollments are declining. Central cities and rural areas are affected by larger decreases than are other areas. Second, because of the large number of women currently reaching childbearing age, the population of school-

age children is expected to increase again in the next decade, so that policy planning based on declining enrollment necessarily must be of an interim nature.

Exhibit 4.5 Enrollment in Elementary and Secondary Schools



Source: Dearman, N. B., & Plisko, V. W. The condition of education: Statistical report, 1979.

Progress through School

The grade in which most students of an age are enrolled in school is called "the modal grade." Relative progress through school may be measured by whether students are at or below the modal grade for their age. In 1950, 26% of 15-year olds were enrolled

below the modal grade. At ages 16 and 17, the percentage was lower, but so was the percentage of students enrolled, because many of those who were behind in school dropped out when they passed the age of compulsory attendance (16 in most states). By 1976, while only 10% of 15-year olds were enrolled below the modal grade, the proportion of 16-year olds in school had increased from 81% in 1950 to almost 96%. More students were staying in school and fewer were falling behind.

Changes within school systems between 1950 and 1976 were responsible, in large part, for the decrease in the number of children enrolled below the modal grade. Many educators believed that retention in grade because of failure to meet academic standards did more harm than good. Schools began providing remedial classes, summer school programs, and increased counseling services to assist those who failed to complete a year's work. At the secondary level, schools began to offer alternative courses and programs that allowed for a fuller range of academic interests and abilities.

Minimum Competency Testing

As fewer children were being held back in school, public concern was mounting about the quality of education in the public schools. The paramount concern was the possibility that some children were being passed through the system without developing skills necessary for adulthood. An outgrowth of this concern has been the movement toward minimum competency testing. The extent of public pressure for a measure of assurance that children are gaining minimal skills is illustrated by recent survey results. By a two-thirds majority, respondents believed students should be required to pass examinations as a condition for grade promotion. The overwhelming majority, however, rejected a return to the practice of retaining a child in a grade he or she had failed. Eighty-one percent favored requiring special remedial classes rather than having a student repeat the grade after failing a promotion examination.

Public concern, along with issues related to the decline in standardized test scores and the movement toward teacher accountability, have prompted 36 states to initiate activity in minimum competency testing. Since such activity has been fairly recent, and is still in the experimental stage, many states are adopting a *wait and see* attitude before mandating examinations as a requirement for grade promotion. As of January 1979, only three states were using or were planning to use the tests for grade promotion, and 17 states were planning to use them as a requirement for high school graduation.

Postsecondary Education

American postsecondary education has grown increasingly complex and diverse, reflecting the growth of American society. As jobs have required more skills, as responsible citizenship and consumer options have required increased knowledge, society and the individuals within it have needed to extend and expand formal education beyond the compulsory school age. To meet this demand, postsecondary education has evolved into a

multifaceted enterprise. Vocational schools allow students to explore career opportunities and train for highly skilled jobs. Adult education courses in high schools and community colleges allow students a means of continuing their learning experience. From small private liberal arts colleges to large public universities, higher education offers a wide range of courses, programs, and degree options.

Vocational School Experience. Although information on the characteristics of persons participating in academic school programs has been available in the United States on an annual basis for at least 3 decades, there has been very little information on the characteristics of persons who attend vocational school after completing high school. An introductory set of data in this area is presented in a recent (September 1979) publication of the Bureau of the Census: *Vocational School Experience: October 1976.* The study outlines results of a survey of students who were participating in vocational programs in October 1976 or who had participated in such programs during the previous year. The survey showed that 4% of the nation's population, 14 years old and over, or 7.2 million persons, were receiving or recently had completed vocational training at the post-high school level in 1976. Also, persons with a college background were more likely to have had recent vocational school experience than persons with 4 years of high school education or less. In addition, the survey showed that a high proportion of vocational school students were employed in white-collar occupations, indicating that blue-collar workers are not the only persons taking such training.

The most common field of training was in the manual and mechanical trades, where enrollment totaled one-third of the students (see Exhibit 4.6). About 47% of the men had been or were enrolled in trade vocational fields, while 37% of the women were training in clerical and business fields – traditional occupations for women.

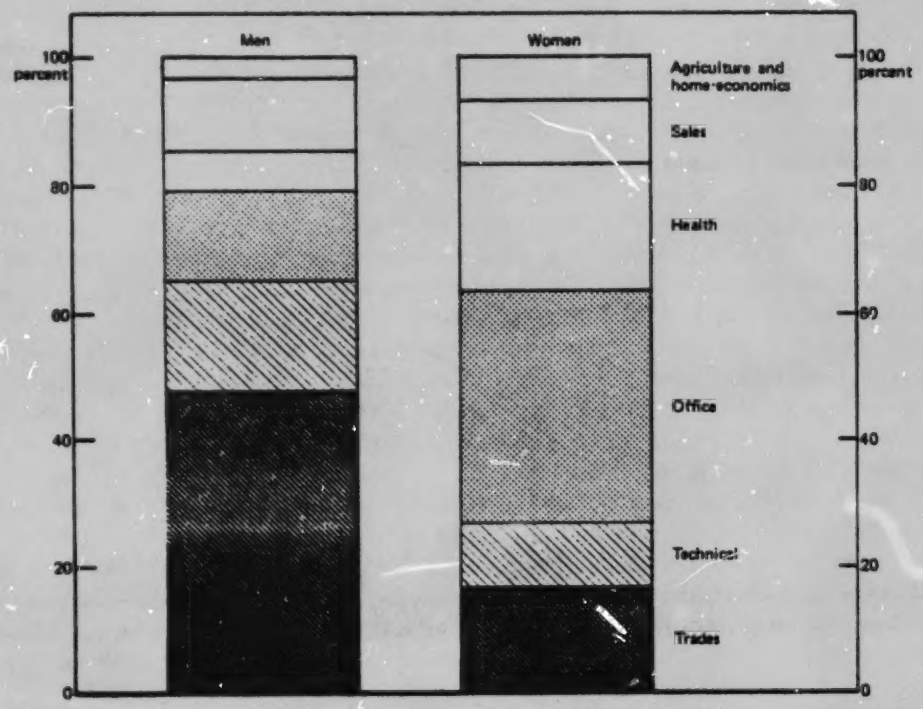
About one-half of the vocational students were male – about the same proportion as regular students. Only 7% of vocational students were black – significantly lower than the 13% they represent among the total high school and college population. The percentage of Hispanic vocational students, however, was much closer to their percentage of the total population in regular school – about 5% in each case.

Participation in Higher Education. In the quarter century stretching from 1952 through 1976, college enrollment grew rapidly. Not only were the numbers of college-age youth increasing, but so were rates of college participation. Colleges and universities were faced with the problem of educating this relatively sudden and large influx of students. Enrollment dropped slightly in 1976 and then rose to a new high in 1977 of 11,415,020 students. At present, the growth rate of the college-age population has slowed, and enrollment appears to have stabilized.

In 1977, women constituted almost 49% of the college student body, up from 41% in 1970. This increase in female enrollment has been fairly consistent over each of the regions of the nation. The slight enrollment increase from 1976 to 1977 (2.6%) can be attributed to an increase of female enrollment of almost 6%. In the same period, male enrollment dropped slightly. This trend toward increased female participation is expected to continue. In 1976, for the first time, and again in 1977, the number of first-time female students enrolling in college exceeded the number of males. If this trend continues, the proportion of females enrolled in college will at least equal that of males within the next 4 years.

Exhibit 4.6

Field of Training of Persons With Vocational School Experience in the Previous Year: October 1976



Note: Includes persons 16 years old and over who were attending vocational school in October 1976 or in the preceding 12 months.

Source: Table G.

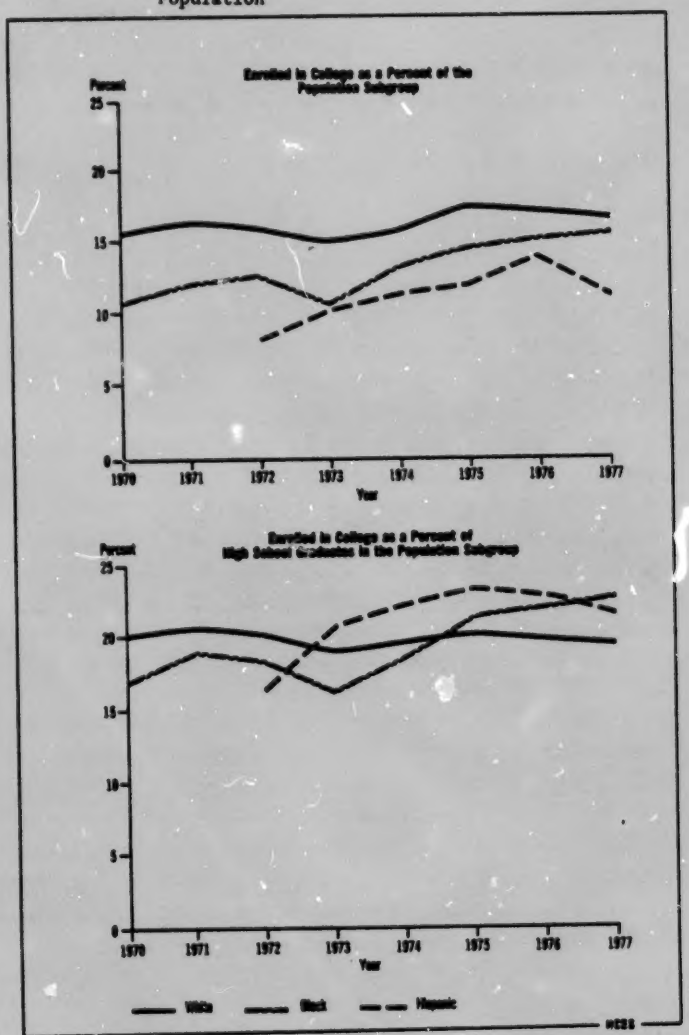
Source: U. S. Bureau of the Census. Vocational school experience: October 1976. Current Population Reports, September 1979, Series P-20, No. 343.

Minority enrollments also have increased. Black and Hispanic enrollment rates for the 18- to 34-year-old age group increased by 5% and 6%, respectively, between 1970 and 1977 while remaining fairly steady for whites (varying less than 2% during that period). In 1977, 17% of whites, 16% of blacks, and 12% of Hispanics in the 18- to 34-year-old age group were enrolled in college (see Exhibit 4.7).

While these rates indicate that minority groups are underrepresented in colleges, an examination of college enrollment rates of high school graduates in each of these populations indicates future increases. By 1975, black and Hispanic college enrollment, calculated as a percent of high school graduates in each of these groups, had exceeded that of whites. Unequal representation of these groups in institutions of higher education thus

may be attributed, in part, to their unequal representation among high school graduates. In 1977, 84% of whites, 70% of blacks, and 56% of Hispanics in this age group had graduated from high school. This represents an increase of 4%, 12%, and 6%, respectively, over 1970 high school graduation rates.

Exhibit 4.7 College Enrollment of the 18- to 34-Year-Old Population



Source: Dearman, N. B., & Plisko, V. W. The condition of education: Statistical report, 1979.

Educational Outcomes

The impact of school and its interaction with the social environment are apparent in national assessments of student performance. The National Assessment of Educational Progress (NAEP) provides a comprehensive data base of information on trends in performance of young Americans. Analyses of recent assessments in science, art, and mathematics provide some indication of the learning that occurs inside and outside the classroom.

From the base year 1970 assessment, achievement in the physical science exercises declined in 1973 and declined more in 1977 across all age groups. The decline in physical science achievement was sharpest among the 17-year olds. On the biological science exercises, scores among the younger age groups declined in 1973, but rose in 1977 (see Exhibit 4.8).

The two NAEP mathematics assessments conducted in 1973 and 1978 showed that, over this period, 9-year olds' performance declined very slightly, the decline for 13-year olds was slightly larger, and the decline for 17-year olds was appreciable (see Exhibit 4.9).

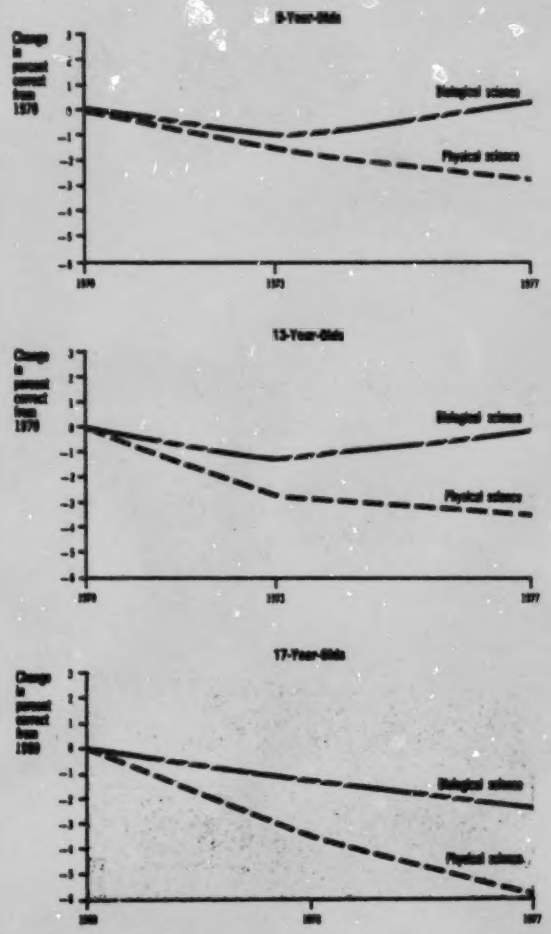
It is interesting to compare the changes in mathematics and science achievement with the changes observed for other subject areas measured by National Assessment. In reading, 9-year olds displayed a slight improvement between 1971 and 1975, while achievement of 13- and 17-year olds did not change. Quality of writing, as displayed in written paragraphs, stayed about the same for 9-year olds between 1970 and 1974, but the quality and coherence of 13- and 17-year olds' written expression declined.

An indication of the knowledge that students bring to college is provided through national standardized entrance examinations. Scores on these tests have tended to decline through the 1970s, confirming the NAEP data. For example, scores on the Scholastic Aptitude Test (SAT) dropped again in 1979, continuing a 10-year trend. The average SAT verbal score dropped 2 points to 427 after holding steady for 2 years, and the average mathematics score fell 1 point to 467. The highest possible score is 800. In 1968, the verbal score average was 466 and the mathematics average was 492.

Researchers have given considerable thought to the factors underlying this general decline in achievement. The explanation presented by the SAT advisory panel on the test score decline is that it came in two stages, each associated with a different set of factors. During the initial stage, colleges and universities extended admissions to many groups formerly excluded. The college population grew in size and diversity. More lower scoring students took the tests for the first time. The entry of low scorers depressed the overall average, but, of course, had no effect on the performance of students who characteristically did well. High ability students did as well as they always had.

After 1970, however, changes in the composition of the test-taking group became less important as scores among all ability groups began to fall. Apparently factors other than compositional changes were influencing performance. Members of the SAT panel cited several interwoven influences: curriculum changes, lower performance expectations, television, structural changes in the family, societal disruption, and diminished student motivation. Members of a NAEP panel considering the recent decline in mathematics scores also saw a number of similar contributory factors. In particular, they cited an

Exhibit 4.8 Science Assessment by Age



Source: Dearman, N. B., & Plisko, V. W. The condition of education: Statistical report, 1979.

emphasis on the *back-to-the-basics* that often has resulted in a narrowing of the curriculum, with more attention focused on computational skills and knowledge of facts and definitions and less time spent on problem solving.

Diplomas and Degrees Awarded

For the individual, the high school diploma provides a measure of educational

Exhibit 4.9 Changes in Average Performance on All Mathematics Items Assessed in 1973 and 1978, Ages 9, 13, and 17

	Number of Items	Average Performance 1973	Average Performance 1978	Change in Average Performance
Age 9	55	38%	37%	-1
Age 13	77	53	51	-2*
Age 17	102	52	48	-4*

*Change is significant at the .05 level.

Source: Education Commission of the States. Changes in mathematical achievement, 1973-78: Results from the second assessment of mathematics, Report No. 09-MA-01, August 1979.

success. For society, the rate at which young adults graduate from high school serves as a common indicator of the extent to which the nation has achieved the major goal of free, universal, basic education. The proportion of 18-year olds who graduated from high school rose steadily during the 1950s and early 1960s, reaching a high of 75.9% in 1969. Since then, a slight decline has occurred (74.7% in 1977). Various trends support the assumption that each year, one-fourth of all 18-year olds will not graduate. As shown previously, for example, the likelihood of completing high school is related to racial/ethnic origin. One-third of young adults of Hispanic origin and one-fifth of young black adults have not completed high school. The dropout rate among blacks fell appreciably in the early 1970s but has leveled off in more recent years.

The 1960s marked a period of unprecedented growth in college and university degrees awarded at all levels. By the early 1970s, the number of bachelor's degrees awarded had reached over 900,000 annually, attaining a peak of 945,776 in 1973-74 and then declining slightly. Master's degrees awarded annually increased steadily through the 1970s, from 230,509 in 1970-71 to 317,164 in 1976-77. Doctor's degrees (except first-professional) have remained steady since 1971-72 at just above 33,000 annually.

The Federal Effort in Education

In 1978-79, the nation spent $151.5 billion on education at all levels. Of this total, the Federal government provided $16.2 billion, or 10.7%. State governments provided 36.2%; local governments, 28.2%; and all other agencies, 24.9%. It is clear, thus, that funding of American education remains largely a nonfederal function.

The largest category of federal assistance is for elementary, secondary, and vocational education. These programs provided states and local education agencies with $6.7 billion in 1979. Most of the assistance was to improve the quality of educational services

offered to students of special national concern to the Federal government – those in low income families, the handicapped, Indians, and students with limited English language skills. Funds were provided also to support vocational education and to compensate school districts for the economic burden placed on them by presence of federally related activities.

Federal outlays for higher education totaled $4.5 billion in 1979. Most of this – $3.8 billion – was in the form of grants, loans, and loan guarantees to assist qualified students to enter and complete schooling beyond the 12th grade.

In 1979, the President proposed, and the Congress approved, establishment of a Cabinet-level Department of Education. The basic purposes of the new Department will be to strengthen the federal commitment to ensuring equal educational opportunity, to support efforts to improve the quality of education, and to improve the management efficiency and accountability of federal educational activities.

A number of other federal programs are related to education, although their primary purpose is to meet other needs; e.g., veterans' readjustment benefits provide assistance to eligible veterans attending school. Comprehensive Employment and Training Act (CETA) training activities frequently are conducted through state and local educational agencies. Also, the health programs of the Federal government support substantial levels of training in the biomedical fields. Many of these related programs have, as their first purpose, the preparation of young people for employment, an area that will be discussed in the next section.

Youth Employment

Many facts concerning the labor market experience of young people are well known. Teenage and young adult unemployment rates are persistently much higher than those of adults, with new entrants and re-entrants generally accounting for approximately two-thirds of teenage and one-fourth of young adult joblessness. Moreover, considerable evidence suggests that these high rates of unemployment result from a much higher incidence of unemployment rather than from any long-term difficulty in finding a job: young people tend to change labor force status more frequently than do adults, often experiencing brief intervening spells of unemployment.

Historical Trends

Exhibit 4.10 places youth unemployment in some historical perspective, minimizing the effect of the business cycle by focusing on the years 1955, 1965, and 1973, when the overall unemployment rate was approximately the same. These comparisons show that the unemployment rates of *all* teenage groups were higher in 1965 than in 1955, particularly for black teenagers. In 1973, white teenage unemployment was at approximately its 1965 rate, while black teenage unemployment had increased markedly. For all 4 years,

the unemployment rates of each race/sex group consistently declined with age, suggesting a process of adjustment; that is, as young people complete or leave school, settle down, and generally mature, they begin to come to grips with the realities of the full-time labor market.

Exhibit 4.10 Unemployment Rates by Race, Sex, and Age, Selected Years, 1955-78

(in percent)

Race, sex, and age	1955	1965	1973	1978
Total, 16 years and over	4.4	4.5	4.9	6.0
Both sexes, 16 to 19 years	11.0	14.8	14.5	16.3
Both sexes, 20 to 24 years	7.0	6.7	7.8	9.5
Both sexes, 25 years and over	3.6	3.2	3.1	4.0
White men				
16 to 19 years	11.3	12.9	12.3	13.5
16 to 17 years	12.2	14.7	15.1	16.9
18 to 19 years	10.4	11.4	10.0	10.8
20 to 24 years	7.0	5.9	6.5	7.6
25 years and over	3.0	2.5	2.4	3.0
White women				
16 to 19 years	9.1	14.0	13.0	14.4
16 to 17 years	11.6	[illegible]	15.7	17.1
18 to 19 years	7.7	13.4	10.9	12.4
20 to 24 years	5.1	6.3	7.0	8.3
25 years and over	3.7	3.6	3.7	4.5
Black and other men				
16 to 19 years	13.4	23.3	26.9	34.4
16 to 17 years	14.8	27.1	34.4	40.0
18 to 19 years	12.9	20.2	22.1	30.8
20 to 24 years	12.4	9.3	12.6	20.0
25 years and over	8.0	5.5	4.2	6.3
Black and other women				
16 to 19 years	19.2	31.7	34.5	38.4
16 to 17 years	15.4	37.8	36.5	41.7
18 to 19 years	21.4	27.8	33.3	36.5
20 to 24 years	13.0	13.7	17.6	21.3
25 years and over	6.9	6.4	6.1	8.2

Source: Young, A. M. The difference a year makes in the nation's youth work force. Monthly Labor Review, October 1979, 102(10), 34-38.

Part of the explanation for the relatively high unemployment and loose labor force attachment of young people is straightforward: young people make up a clearly distinguishable component of the marginal or peripheral labor force, whose employment is generally casual, intermittent, and part-time. The basis for this rests in both the supply of, and the demand for, youth employment.

Because characteristics of young people differ somewhat by age, it is useful and important to distinguish those 16 to 17 years old from those ages 18 to 19 and ages 20 to 24. Most young people, ages 16 to 17, are in school (89% in October 1978), a fact that alone imposes certain constraints on the kinds of jobs available to them and on their

job-search behavior. Of this group, most are working after school or on weekends or are seeking part-time jobs. Although fewer youths, ages 18 and 19, are enrolled in school and a higher proportion of the unemployed are seeking full-time work, there is a similar casualness toward any kind of permanent, career-oriented job as with those ages 16 and 17. Young adults (ages 20 to 24) exhibit a turnover pattern similar to that of teenagers but are clearly in the process of settling down. For all these age groups, jobs often are seen in purely instrumental terms: other activities are more important and these other activities often require money.

By itself, however, the youth supply explanation is inadequate. For example, school enrollment may itself be a response to economic conditions and poor job prospects. Going to school may be perceived as better than working in a low-paid, menial, or arduous full-time job. Also, the labor market behavior of young people may be affected by the array of jobs employers make available to them. That is, the settling down process is conditioned and constrained by employer needs and hiring practices and by the structure of the labor market – the demand side.

Regarding demand, a number of economists have noted the usefulness of distinguishing between *secondary* and *primary* firms and jobs, because the characteristics of the jobs offered by each tend to differ. Most young people work in secondary jobs – jobs with low wages, requiring menial work, and with little prospect or incentive for continuous employment. The employees work, for example, as loaders, handlers, stock clerks, packers, and retail salespeople. These jobs provide virtually no training, except in the most basic work habits, and perhaps not even that, since there is often little penalty for dereliction. Young white men, ages 20 to 24, without a college education are one exception. They, unlike blacks and women, often find jobs in small machine, body, and printing shops that usually provide their workers with both a wide range of technical skills and job contacts for the next step in the adjustment to the labor market.

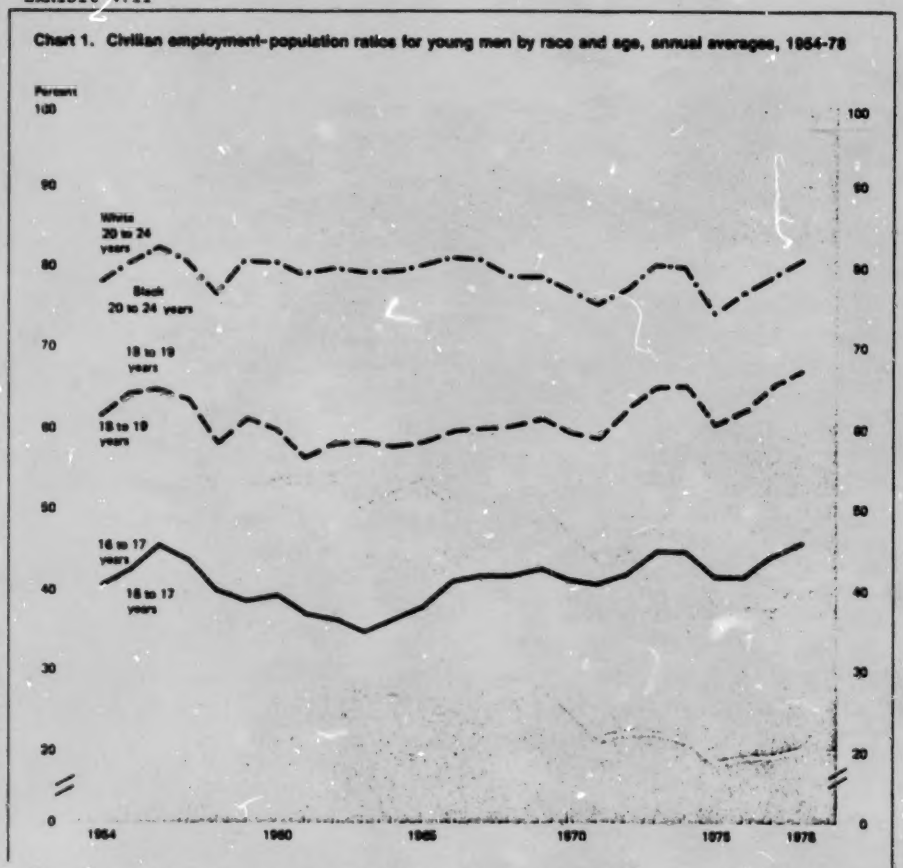
Racial Differentials Among Young Men

Evidence of a persistent and chronic racial differential for virtually all labor market indicators has been documented amply. Data have shown that the unemployment rates of black males have worsened relative to unemployment rates of white males. Since 1954, labor force participation rates and employment-population ratios have dropped steeply among blacks, while there has been little change for whites; and the proportion of young black men with work experience in any given year has been declining.

Exhibit 4.11 shows the widening gap between the employment-population ratios of young blacks and whites over the last 25 years. To the extent that the decline among blacks reflects the relatively poor quality of available jobs, the unemployment differential understates the labor market problems confronting black males. This implies that the behavior of nonparticipants is critical to understanding black youth unemployment problems.

The employment-population ratios of white male teens have inched up slightly, particularly since 1965, while no change has been posted among white males, ages 20 to

Exhibit 4.11



Source: Waldman, E., et al. Working mothers in the 1970s: A look at the statistics. Monthly Labor Review, October 1979, 102(10), 41.

24. Also, since the mid-1960s, the decline in the ratios among black male teenagers has extended to those ages 20 to 24.

Some researchers have suggested, particularly on the strength of declining participation rates, that the labor market prospects of many young black men are so bleak that many have permanently dropped out of the conventional, measured labor force. Rigorous statistical support for this position, however, has not been presented thus far.

Differentials Among Young Women

During 1954-78, the most important features of the labor market experience of

young women were sharp increases in unemployment among black women, an upward trend in the female-male unemployment differential, and important changes in the patterns of labor force participation between blacks and whites. Exhibit 4.11 shows that the already high unemployment rates of female black teenagers have increased dramatically over time. Unemployment among young black women, ages 20 to 24, demonstrated a slight upward trend after 1965. The unemployment rates of white teenage women appear to have increased only slightly – not approaching the magnitude of the increase for black teens.

The following tabulation shows the rate of unemployment among young men to that of young women:

Year	Ages 16 to 19	Ages 20 to 24
1954	0.84	0.68
1955	0.88	0.79
1965	1.11	1.14
1969	1.17	1.24
1973	1.09	1.15
1978	1.08	1.11

The data show that prior to 1965, female teenagers had lower unemployment rates than their male counterparts, whereas the reverse was true from 1965 on. Among young adults, ages 20 to 24, the differential also widened – but not consistently.

Labor force participation rates for women have increased dramatically since the end of World War II. Teenage and young adult females have shared in these increases. Between 1954 and 1978, the increase for white female teens, ages 16 to 17, was from 29% to 49%; for those ages 18 to 19, participation expanded from 52% to 65%. The participation of young white women, ages 20 to 24, jumped from 44% to 69%. The same 2-year comparison indicates much smaller increases for black women: from 25% to 28% among women, ages 16 to 17; from 38% to 49% for those ages 18 to 19; and from 50% to 63% for young adults. Thus, while there was no downward trend in participation rates among young black women, they have dropped sharply *relative* to the rates for white women (see Exhibit 4.12).

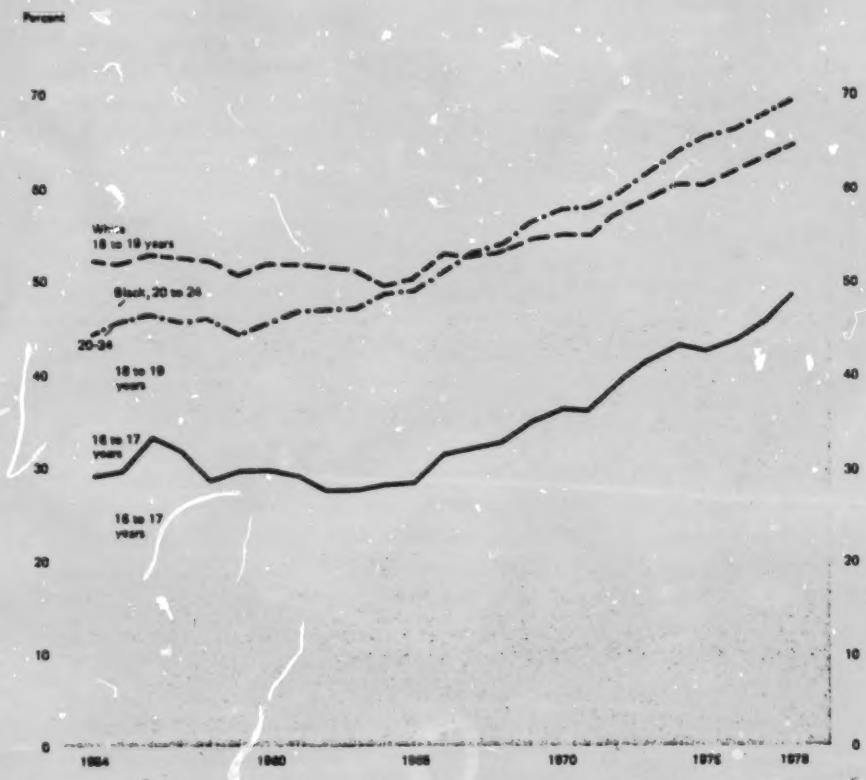
Explaining the Unemployment Situation

Many reasons have been given to explain the youth employment situation. Although no consensus has been reached among analysts, certain contributing factors are cited persistently. No one factor is cited as telling the whole story; rather, each factor is seen as explaining a part of the problem.

A Crowded Market? The most popular explanation, not only for unemployment among all youth but also for the relative and absolute employment deterioration among blacks, is the post-World War II baby boom. This surge in population, it is stated, resulted in an excess supply of young people, and, other things equal, higher unemployment rates.

Exhibit 4.12

Chart 3. Civilian labor force participation rates for young women by race and age, annual averages, 1954-78



Source: Waldman, E., et al. Working mothers in the 1970s: A look at the statistics. Monthly Labor Review, October 1979, 102(10), 41.

From the mid-1950s to the mid-1960s, the white teenage and the black teenage populations increased by roughly the same amount – 55% and 50%, respectively. Yet, from 1964 on, the annual growth in the black population accelerated relative to whites. Between 1964 and 1976, the young black population grew at an annual rate of 4.3%, compared with a 2.3% annual rate for white youth.

There are problems with this explanation. For example, it requires the assumption that the labor market is segmented or divided in some way along racial lines, otherwise it would not be clear why a surplus of young blacks should increase their unemployment relative to whites instead of doing damage to both. In this regard, the *1978 Economic Report of the President* examined the proposition that the labor markets for black youth and white youth are separated to a large extent, perhaps because of a geographical separation within particular areas, or because of labor market discrimination against black

youth. Future research will require more explicit analysis of racial labor market disparities.

"Priced-out" by Minimum Wage? The traditional explanation that dominates the literature on youth unemployment *per se* is the effect of the minimum wage, which is hypothesized to have two deleterious effects on young people. First, an effective minimum wage is said to price many allegedly *less productive* young people out of the job market. That is, if employers are forced to pay higher wages as a result of the minimum wage, they will substitute older, more productive workers for younger ones. Second, it has been suggested that an effective minimum wage restricts the opportunity for young people, who would work for wages below the minimum, to acquire valuable on-the-job training.

Empirical evidence suggests some modest disemployment effect of the minimum wage. One study estimated that in 1972 the unemployment rate of black teens was 3.0 percentage points, and that of white teens 3.9 percentage points, higher than if the 1966 amendments to the minimum wage law had not been enacted. This is not negligible, but does leave the bulk of youth unemployment unaccounted for. A current study notes that the minimum wage could not explain rising unemployment over time because, relative to the median wage, it is no higher now than in the 1950s, and there appears to be no separate disemployment impact as a result of coverage extensions.

Job Suburbanization and Skill Mismatch? The rapid suburbanization of jobs in addition to *de facto* housing segregation and inadequate reverse-commuting transportation have trapped many black workers in the central city where they have saturated the job market. Analysts suggest that higher unemployment rates and lower employment-population ratios of blacks are the result of such conditions. Moreover, some analysts assert, the bulk of the jobs that are located in the central city generally require greater and different skills than the central city ghetto dweller possesses.

Evidence that black youth employment problems are central-city specific is scanty. In fact, there is evidence that black unemployment is insensitive to central-city residence. Racial differences in unemployment rates and employment-population ratios remain substantially the same regardless of place of residence. The following tabulation shows the employment-population ratio for teenagers by place of residence:

	1975	1977	1978
Black, central city	22.1	21.2	24.3
Black, suburbs	26.1	25.3	30.0
White, central city	44.7	47.7	50.2
White, suburbs	45.7	51.9	53.0

The skill mismatch issue raises several questions. To what does skill refer? Years of education? Years of work experience? Specific vocational training? Specific personality characteristics? It is sometimes assumed that workers acquire work skills in formal education or training and then bring the skills to the labor market. A number of economists have argued recently, however, that most job skills basically are acquired on the job. Therefore, skills acquired by different groups in the labor force may depend upon employer practices in hiring, screening, and job assignments. The critical question might be whether blacks, when compared with whites, have the same access to training and receive the same payoff to that training.

Some evidence exists that is inconsistent with the skill mismatch hypothesis. Recent research in eight large metropolitan areas suggests that the growth in central city jobs was not skewed toward *high-skill* jobs. Indeed, about 70% of the job growth in the eight central cities consisted of semiskilled (salespeople, clerks, operatives, craftworkers) and low skilled (laborers and service workers).

Influx of Women? Dramatic increases in the labor force participation rates of women may have reduced the demand for young labor, driving up their unemployment rates. Because many women work at part-time, entry-level jobs, this hypothesis has intuitive appeal. An increasing supply of female labor, given occupational crowding, moreover, might be expected to raise the unemployment rates of young women as well. Little research has been done on this particular issue; however, it cannot be denied that there is an increased long-term incidence in the movement of the two variables – increases in female labor force participation and increases in unemployment.

Other Explanations. Analysts have proposed still other partial explanations for current trends in youth unemployment problems. Some discussions have centered on a so-called "new labor market" of more equal earnings for the most educated and most recently graduated black males. A "job search" hypothesis has been proposed to answer the critical question of why blacks would be more likely than whites to experience a spell of unemployment after quitting a job. Some evidence suggests that black males, who are not from stable two-parent families, are less likely to work, and work somewhat fewer hours, than those from stable two-parent families. This finding is important because half of young black males do not come from stable two-parent families. Finally, some recent studies have shown a relationship between minority status and a decrease in intrinsic work values, an increase in emphasis on economic and security rewards, and greater endorsement of the antiwork ethic. Since minority workers often are locked into jobs that notably deprive them of access to meaningful job activities, it may be that the jobs, rather than ethnic background, account for the correlation.

As is clearly evident, the economic literature on the subject of youth employment offers a number of explanations for the diverse developments. Rigorous evidence to support some of the hypotheses, however, has not been produced yet, and even the evidence that is accepted by leading experts provides a less-than-full explanation for young people's complex labor market problems. To alleviate some of these problems, the Federal government has undertaken a number of major programs.

Federal Employment and Training Programs for Youth

Federal efforts to aid youth in the school-to-work transition are centered chiefly in a number of programs authorized by the Comprehensive Employment and Training Act (CETA) of 1973, as amended in 1978. The programs are administered by the Employment and Training Administration of the Department of Labor and are described briefly below.

The Job Corps is a national system of 74 residential centers in 33 states, the District of Columbia, and Puerto Rico. The program provides basic education, vocational training,

counseling, health care, and similar renewal services to help disadvantaged young men and women, ages 16 through 21, prepare for jobs and responsible adulthood. At any one time, the Job Corps has about 27,000 enrollees (68% male, 30% black, 12% Spanish speaking, 2% Indian, and 26% white). Average length of stay is about 6 months. Since January 1965, more than 668,000 young people have been served. Fiscal year 1978 (FY 78) funding was $417 million; FY 79 funding was $296 million. In FY 78, Job Corps placement was 93% (68% to jobs, 20% to school or other training, 5% to military service).

The Youth Incentive Entitlement Pilot Projects are designed to assist those youth, ages 16 through 19, most in need of completing high school as a foundation toward meeting career goals. Eligible youth in selected geographic areas are guaranteed year-round jobs if they agree to return to or to remain in high school.

The Youth Community Conservation and Improvement Projects provide employment on community planned projects to 16- through 19-year-old unemployed youth. The projects are organized by private nonprofit organizations such as the YMCA and the Red Cross. Efforts are made to transfer the young people to unsubsidized jobs at the end of the maximum 12-month enrollment.

The Youth Employment and Training Programs are designed to enhance job prospects and career goals of youth, ages 14 through 21, who have the most severe problems in entering the labor market and who come from families whose income meets eligibility criteria. The program provides year-round employment and training activities.

The Summer Youth Employment Program provides economically disadvantaged youth, ages 14 through 21, with employment and training activities during the summer months. The program provided employment for approximately 1,009,300 youth during 1978 for an average of 26 hours per week during an approximately 9-week period of summer program operations. In 1979, almost 900,000 youth participated in the program. The 1978 budget was $795 million; the 1979 budget, $740 million.

The Young Adult Conservation Corps gives young people, ages 16 through 23, experience in various occupational skills through productive work on conservation and other projects on federal and nonfederal lands and waters. About 25,000 youth participated in 1979, at a cost of $216 million.

Most federal activities related to youth may be treated under one of the three grand rubrics of health, education, and employment. A number of issues are of such special concern that they merit particular discussion; they will be examined in the following pages.

Special Youth Problems

Juvenile Delinquency

In casual conversation, juvenile delinquency usually refers to all illegal behavior by youth — from smoking marijuana, to shoplifting, to arson — whether or not the youth are caught by the authorities and punished. But in official criminal justice reports, juvenile

delinquency does not include illegal acts that do not come to the attention of authorities. It does include some behaviors, such as truancy and loitering, that many persons do not label delinquent. Official delinquency, in brief, is any act or condition that has been detected and designated as delinquent by the criminal justice system. It includes two categories, either of which may result in a juvenile being adjudicated as delinquent or as otherwise subject to the jurisdiction of the juvenile court: (1) criminal offenses – acts prohibited by adult criminal law; e.g., robbery, burglary, or sale of narcotics; and (2) juvenile status offenses – acts that are offenses only when committed by minors; e.g., running away, truancy, violating a curfew, incorrigibility (also called "unruliness"), needing supervision, and so forth. (The status offender is subject to the juvenile court primarily in order to receive its protection.)

The extent of juvenile delinquency is measured by a number of sources, of which the oldest and most widely used is the Uniform Crime Report (UCR) of the Federal Bureau of Investigation. The UCR and other sources, such as self-report studies, indicate the following current status and trends in delinquency among youth:

- Since 1957 there has been a gradual increase in the rates of young people being processed by the juvenile courts. The UCR shows that in 1976 law enforcement officials reported slightly more than 2 million arrests of young persons between ages 11 and 17. This total comprised approximately 7% of the 28.8 million youth in that age cohort.
- More males than females are arrested for delinquency. In 1976, 82% of juvenile arrests were males. The arrest rates were 112.7 per 1,000 male juveniles, and 25.7 per 1,000 female juveniles. Arrest data also show that offense patterns of the two sexes differ. Both females and males are about as likely to be arrested for serious property offenses and for less serious offenses; males were arrested more often for serious violent offenses.
- Detention was used an average of 21% of all cases processed by the courts. There was an overall 7.8% decrease in detention from 1976 to 1977.
- As a juvenile increases in age, so does the likelihood of his involvement in the court. For example, a person 17 years old is four times more likely to be processed by the court than a 13-year old.
- The number of status offender cases has been dropping. In 1975, an estimated 355,000 status offense cases were listed. In 1976, the number dropped to 280,000, a decline of over 21% in a single year.
- Females are more likely than males to be referred to court as status offenders. In 1976, 46% of all offenses involving females were for status offenses, while only 16.3% of all offenses involving males were for status offenses. On the basis of official court records, females have been stereotyped as predominantly involved in status offenses or in sexual misconduct, but several self-report surveys have revealed that girls, in fact, do not engage more often than boys in these activities. Girls are just more likely to get arrested and adjudicated for them.
- The data show racial variations. In 1976, 20% of cases processed involved blacks, and 8% involved members of other racial or ethnic minorities (Hispanics, Indians, or others). Minorities were more likely to be charged with crimes against people (16.3% of all cases involving minorities, 6.4% of all cases involving whites). Cases

involving whites are likely to be handled more quickly than cases involving minorities (59% of cases involving whites are processed within 1 month, as opposed to 49.2% of cases involving minorities).

Widespread experimentation with alternatives to the traditional juvenile justice system has been undertaken over the past decade. These alternatives seek to reduce the number of youth involved in the system and their level of penetration, to minimize the negative labeling that goes with system involvement, and to provide a more humane atmosphere than that found in traditional detention or correctional settings.

Three major kinds of alternatives have been developed: decriminalization, diversion, and deinstitutionalization. Decriminalization means removing some conduct – usually status offenses – from the jurisdiction of the juvenile justice system. Diversion is an attempt to provide a nontraditional form of help to youth (and to their families), usually outside the judicial system. Much of what is known as diversion is, in reality, a formal, dressed-up form of interagency referral. Deinstitutionalization refers to attempts to get juveniles out of traditional detention and correctional facilities and into settings more like normal family homes or dormitories.

Individual studies have reported alternative programs with positive results – others with negative results. Some studies find little or no effect at all. Field surveys have found a number of qualitatively attractive alternative programs, suggesting that humane alternatives do exist. Certainly nothing yet suggests that the experiments should be abandoned.

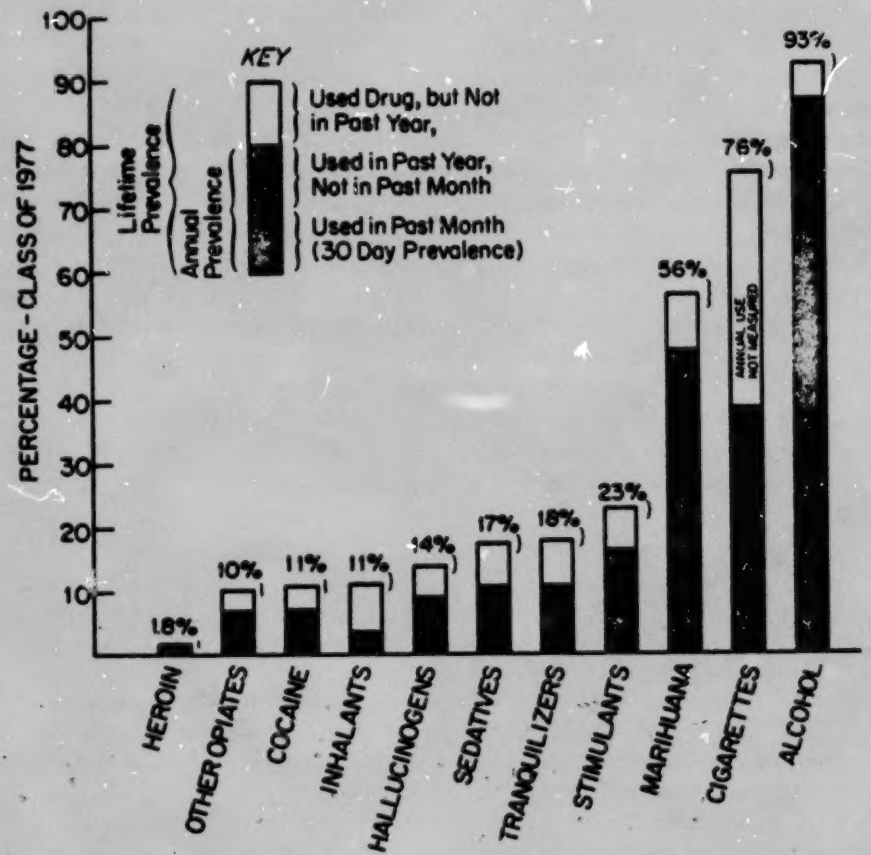
Alcohol and Drug Misuse

Alcohol and drug misuse are behaviors with major implications in many areas. Not only do they increase risk of accidents, suicides, and homicides, they also contribute to family disruption and poor school and job performance; and they have a potential for leading to long-term chronic illness.

Use of alcohol and drugs has been increasing among young people. Use of the two major licit drugs – alcohol and tobacco – is much more widespread than use of any of the illicit drugs (see Exhibit 4.13). A survey of high school seniors in 1977 reported that nearly all students had tried alcohol (93%) and that the great majority (71%) had used it in the month preceding the survey. Since 1966, the number of high school students intoxicated at least once a month has more than doubled, from 10% to over 20%. Six percent of high school seniors drink daily.

By contrast, there has been a significant drop in the number of teenagers who smoke (see Exhibit 4.14). From a rate of 11.5% of persons, 12 to 18 years old, who were current smokers (once a week or more) in 1968, the rate rose to 15.6% in 1974, but then declined to only 11.7% in 1979. The decline was much more marked among males than among females, with the result that the 1979 rate for males was only 10.7% and the rate for females, 12.7%. The sex difference in 1979 between the 17 to 18 years subgroups was even more striking: 19.3% for males and 26.2% for females.

Exhibit 4.13 Lifetime, Annual, and Thirty-Day Prevalence of Use, (and Recency of Use) for Eleven Types of Drugs, Class of 1977



NOTE: The bracket near the top of a bar indicates the lower and upper limits of the 95% confidence interval.

Source: U. S. Department of Health, Education, and Welfare. Drug use among American high school students 1975-1977. Reprinted 1978.

The 1977 high school survey also reported that 6 in every 10 seniors (61.6%) had used illicit drugs at some time in their lives. A substantial portion of them, however, had used only marijuana, which was by far the most frequently used illicit drug. Fifty-six percent of the students reported having used it at some time in their lives; 48% had used it in the year preceding the survey; and 35%, in the preceding month.

About one-third of the seniors (35.8%) reported using an illicit drug other than marijuana. Only 1.8% of the sample admitted to ever using heroin, the most infrequently

Exhibit 4.14 Teenage Cigarette Smoking, According to Sex and Age: United States, 1968, 1974, and 1979

(Data are based on telephone interviews of samples of the noninstitutionalized population)

Sex and age	Year		
	1968	1974	1979
	Percent who are current smokers		
Both sexes, 12-18 years....	11.5	15.6	11.7
Male			
12-18 years.....	14.7	15.8	10.7
12-14 years.....	2.9	4.2	3.2
15-16 years.....	17.0	18.1	13.5
17-18 years.....	30.2	31.0	19.3
Female			
12-18 years.....	8.4	15.3	12.7
12-14 years.....	0.6	4.9	4.3
15-16 years.....	9.6	20.2	11.8
17-18 years.....	18.6	25.9	26.2

NOTE: A current smoker is a person who smokes at least once a week.

SOURCES: National Clearinghouse for Smoking and Health: Patterns and Prevalence of Teenage Cigarette Smoking, 1968, 1970, 1972, and 1974. DHEW Pub. No. (HSM) 74-8701. Health Services and Mental Health Administration, Rockville, Md., July 1974; National Institute of Education, DHEW, Unpublished data.

Source: U. S. Department of Health, Education, and Welfare. Health: United States 1979. Washington, D. C.: DHEW Publication No. (PHS) 80-1232, 1979.

used drug. The percentage of seniors who had ever used illicit drugs increased steadily over the years 1975 to 1977, from 55% to 62%.

The physical and psychological effects of alcohol and other drugs are highly variable. They differ from person to person as well as from drug to drug. It is, therefore, difficult to determine precisely how harmful experimentation is in terms of the drug use to which it leads. By any measure, however, drug problems are serious, and if the full potential of adolescents and young adults is to be realized, steps must be taken to reduce the harmful effects of these substances.

Adolescent Abuse and Neglect

Any attempt to document the incidence of adolescent abuse and neglect on a nation-wide basis must suffer from the problems that have plagued researchers in attempting to analyze the incidence of child abuse and neglect. Official statistics are incomplete. Uniform definitions of abuse and neglect are not used in all areas. Reported cases make

up only a fraction of all true cases of abuse and neglect. In regard to adolescent reporting, even more problems exist. Society tends to accept overly strict disciplining of adolescents more readily than they do that of children. There exists a popular belief that adolescents can fight back, can run, or can report on their parents. While there is some truth in this belief, it still belies the subtle issues of guilt, submissiveness, and family protectiveness that adolescents face in confronting their own abuse. With all these caveats, recent studies show, nevertheless, that incidence of abuse and neglect is remarkably even at all ages from birth through age 17 (see Exhibit 4.15). There is a higher than average incidence at ages 1 and 2, a slight dropoff at age 10, and a rapid drop at age 17. Overall, there is a slight decline from age 2 through age 16, but the data clearly contradict the commonly held assumption that adolescents are much less frequent victims of abuse and neglect than are younger children.

Exhibit 4.15 Number of Cases of Child Abuse and Neglect by Age and Sex

AGE	MALE	FEMALE	SUBTOTAL	COLUMN %
<1	2,325	2,090	4,415	4.1
1	4,098	3,656	7,754	7.3
2	4,119	3,574	7,693	7.2
3	3,682	3,314	6,996	6.5
4	3,509	3,019	6,996	6.1
5	3,349	3,103	6,452	6.0
6	3,596	3,242	6,838	6.4
7	3,529	3,194	6,723	6.3
8	3,252	2,951	6,203	5.8
9	3,217	2,910	6,127	5.7
10	3,080	2,795	5,875	3.3
11	2,812	2,631	5,443	5.1
12	2,830	2,867	5,697	5.3
13	2,581	3,159	5,740	5.4
14	2,538	3,296	5,834	5.5
15	2,103	3,393	5,496	5.1
16	1,653	2,869	4,522	4.7
17	966	1,635	2,601	2.4
TOTALS	53,239	43,698	106,937	100.0

SOURCE: American Humane Association, "Annual Statistical Analysis of Child Neglect and Abuse Reporting, 1977," for NCCAN

Source: Fisher, B., et al. Adolescent abuse and neglect intervention strategies and treatment approaches: A study for the Youth Development Bureau, U. S. Department of Health, Education, and Welfare. Final Report, Volume 1. San Francisco: URSA, July 1979.

In regard to sex, the numbers of male and female victims vary dramatically as the age group of the victim increases. The greatest percentage of male victims occurs at age 3 (54%), but at age 16, females constitute 63% of the total number of incidences reported.

Sexual abuse in 1977 comprised only 4% across all age groups; and 7% of victims ages 12 through 17. Of all substantiated reports of sexual abuse, 71% involved persons

ages 9 through 17. Thus, one of the most surprising findings was that abuse of children, ages 0 through 8, comprised 29% of all substantiated sexual abuse cases.

Of all validated reports of maltreated adolescents in 1977, the great majority, almost 70%, involved reports of neglect as opposed to physical or sexual abuse.

Adolescents live in a broader world than small children, and as such, they are in contact with a greater number and variety of adults. In consequence, there exists a wide range of agencies, organizations, and people who can work with maltreated adolescents and their families. Thus, it is common for staff from schools, police, social services, churches, courts, mental health agencies, medical agencies, and many others to contribute to alleviating problems of abuse and neglect.

A view widely held in service delivery systems (although not so widely practiced) is that services will be more effective if the victim is treated within the context of relevant social systems, such as the family, the peer group, the classroom, and so forth. In practice, treatment programs such as this are difficult to carry out, in part because they require a great deal of shared knowledge among the service providers. To this end, much federal effort in this area has been in the development and dissemination of information and training materials for different professionals – police, teachers, doctors and nurses, and others – who are in a position to aid maltreated adolescents.

Two agencies within the Administration for Children, Youth, and Families – The National Center on Child Abuse and Neglect and the Youth Development Bureau – are coordination and administrative centers for Federal government activities in this area.

Teenage Pregnancy

Childbearing during adolescence is a high risk experience for mother and child alike, especially if the mother is a very young adolescent, or if she does not receive proper prenatal care and nutrition. Yet one-fourth of American teenage girls have had at least one pregnancy by age 19. Every year about 1 million adolescents under age 19 become pregnant, including perhaps 300,000 under age 15 – which represents an annual rate of 10% for all teenage girls. Two-thirds of them are unmarried. At least 3 in 10 elect to terminate their pregnancies. Birth rates for teenagers, ages 16 to 19, are declining but they are increasing for girls under age 16.

Those mothers, who are very young adolescents or who do not receive proper prenatal care and nutrition, have greater risk of bearing low birthweight infants, with consequent developmental problems and risk of infant death associated with low birthweight. Often they also face significant social problems: disruption of schooling, high rates of repeat pregnancy, and public dependency. A substantial proportion of school districts, by not providing for continuing education, still encourage expectant mothers to drop out of school; more than 25% of the young mothers become pregnant again within just a year after their first delivery.

A major underlying problem that urgently needs addressing for this age group is the inadequate knowledge of, and access to, information on sexual behavior and family planning services. In 1976, an estimated 40% of unmarried teenage girls, ages 15 to 19

(two-thirds by age 19), had engaged in sexual intercourse, and 25% of them had never used any form of contraception.

Birth control methods currently prevent an estimated 750,000 unwanted pregnancies annually. If all sexually active young people, who do not want to become pregnant, were to use some form of contraception regularly, it is estimated that premarital pregnancies would drop by more than 300,000 a year.

There is growing evidence that comprehensive programs for the pregnant teenager and her baby, especially those that emphasize continued schooling, are associated with fewer repeat pregnancies. An example is a program at the Johns Hopkins Medical Institutions in Baltimore. There, staff members provide young mothers with comprehensive medical and psychological services, conduct classes from the first prenatal visit through labor, delivery, and for 3 years after delivery, and, perhaps most important, form close supportive relationships with the young women. Recent results indicate that 85% of mothers enrolled at the center have returned to school and only 5% became pregnant again within a year after delivery. Of all Baltimore teen mothers, only 10% return to school and 47% become pregnant again within a year. Teen mothers in the program also have had fewer obstetrical complications and fewer premature deliveries, and have given birth to larger and healthier babies than Baltimore's teen mothers in general.

Federal concern in these matters was shown in 1978 by the establishment within the Department of Health, Education, and Welfare of the Office of Adolescent Pregnancy Programs. The mission of the agency is to assist in setting up networks of community-based services for adolescents at risk of unintended pregnancies, for pregnant adolescents, and for adolescent parents. In 1979, the Office completed its first cycle of grant awards and also began a series of technical workshops in different regions of the country.

Runaway Youth

A survey conducted in 1976 found that approximately 733,000 youth, ages 10 to 17, left home annually without parental consent for at least overnight. A major contributing factor was family conflict. The survey also presented evidence that large numbers of homeless and neglected youth were not being served by traditional social service agencies.

In response to concerns raised by this situation, the Runaway Youth Act was authorized and signed into law in 1977 for the purpose of providing assistance to those youth, who, while away from home and living on the streets, were vulnerable and exposed to exploitation and other dangerous encounters.

By 1978, the National Runaway Youth Program, within the Youth Development Bureau, had undertaken funding of 166 individual runaway youth programs that were providing services to over 32,000 runaway youth and their families located in 48 states, Puerto Rico, the District of Columbia, and Guam. The Program also was funding the National Toll-Free Communications System to serve runaways, other homeless youth, and their families. Since its inception, 3 years earlier, the Program had served over 75,000 youth in its individual programs, and over 250,000 youth had used the National Toll-Free Communications System (see Exhibit 4.16).

Exhibit 4.16 YDB Administrative Overview

Fiscal Year	Programs Funded	Dollars Expended	No. of Youth Served by Programs	No. of Youth Served by National Toll-Free Communications System
1975	66	$ 4,146,826	*	*
1976	129	7,903,734	15,000	19,000
1977	129	7,710,000	29,595	102,106
1978	166**	10,240,000	32,000	135,880

* Data were not available on the number of youth served by programs or by the National Toll-Free Communications System.

** The total number of programs includes the new programs funded as of September 30, 1978.

Source: U. S. Department of Health, Education, and Welfare. Annual report to Congress on Title III, the Runaway Youth Act, P.L. 95-115: Action memorandum, September 28, 1979.

Intake data gathered at the various programs throughout the country yield the following profile of youth served:

- Sex - female (59.4%)
- Age - 16 years (25%)
- Race/ethnic origin - white (74%)
- Living situation past 3 years - home with parents or legal guardians (82.4%)
- Juvenile Justice System involvement - no involvement (59.4%)
- Reasons for seeking services - poor communication with parent figures (51.8%)
- Parent participation - one or both parents (51.9%)
- Length of stay - less than 14 days (84.1%)
- Disposition - home with parents or legal guardians (30.4%)

Most of the individual programs throughout the country have developed or are developing multiple service components addressing various needs of young people in the local communities. At the same time, the programs are becoming viewed as legitimate members of the community social service network and are being used by other social service agencies and by the law enforcement/juvenile justice system as resources for youth and families.

Summary

Over the last decade, American social science researchers have expressed increasing concern that so much of the information gathered to describe conditions in the United States deals only with the health, education, employment, economic, and welfare status of individuals, and does not take into account the settings in which the individuals live, learn, work, and interact. The primary setting in which children and youth develop, of course, is the family. In the family, one's first learning occurs, and the effects of the family on its members' health, education, and eventual employment status are profound, pervasive, and long lasting. In the next chapter, current trends and conditions of American families will be discussed in detail.

BIBLIOGRAPHY

Dearman, N.B., & Plisko, V.W. *The condition of education: Statistical report, 1979.* Washington, D.C.: National Center for Education Statistics, 1980. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 017-080-02008-4.

Education Commission of the States. *Changes in mathematical achievement, 1973-78: Results from the second assessment of mathematics.* Denver, Colorado: Education Commission of the States, Report No. 09-MA-01, August 1979.

Fisher, B., et al. *Adolescent abuse and neglect intervention strategies and treatment approaches: A study for the Youth Development Bureau, Department of Health, Education, and Welfare.* Final Report, Volume I. San Francisco: URSA, July 1979.

U.S. Bureau of the Census. Estimates of the population of the United States and components of change: 1940 to 1978. *Current Population Reports,* May 1979, Series P-25, No. 802.

_____. Vocational school experience: October 1976. *Current Population Reports,* September 1979, Series P-20, No. 343.

_____. Estimates of the population of the United States by age, race, and sex: 1976 to 1979. *Current Population Reports,* January 1980, Series P-25, No. 870.

U.S. Department of Health, Education, and Welfare. *Drug use among American high school students 1975-1977.* Washington, D.C.: National Institute on Drug Abuse. DHEW Publication No. (ADM) 78-619, Reprinted, 1978.

_____. Annual report to Congress on Title III, the Runaway Youth Act, P.L. 95-115: Action Memorandum, September 28, 1979. (A memo from Assistant Secretary for Human Development Services to The Secretary related to *Runaway and otherwise homeless youth fiscal year 1978 annual report on the Runaway Youth Act.*)

_____. *Healthy people: The Surgeon General's report on health promotion and disease prevention, 1979.* Washington, D.C.: Public Health Service. DHEW Publication No. (PHS) 79-55071, 1979. Available from: Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Order Stock No. 017-001-00416-2.

_____. *Health: United States 1979.* Washington, D.C.: Public Health Service. DHEW Publication No. (PHS) 80-1232, 1979.

Waldman, E., et al. Working mothers in the 1970s. A look at the statistics. *Monthly Labor Review,* October 1979, 102(10), 41.

Young, A.M. The difference a year makes in the nation's youth work force. *Monthly Labor Review,* October 1979, 102(10), 34-38.

CHAPTER 5

STATUS OF FAMILIES

Kurt J. Snapper

Introduction

Reports describing the statistically "average" family used to be prepared on a rather regular basis. A description of the "average" family might have been, for example, that it had 2½ children, 1½ cars, a mother and father, and one primary wage earner. Over the years, these reports about the "average" family provided some indication of how the family had changed. They have, for example, chronicled the baby boom and its passage into middle age, and changes in average number of children.

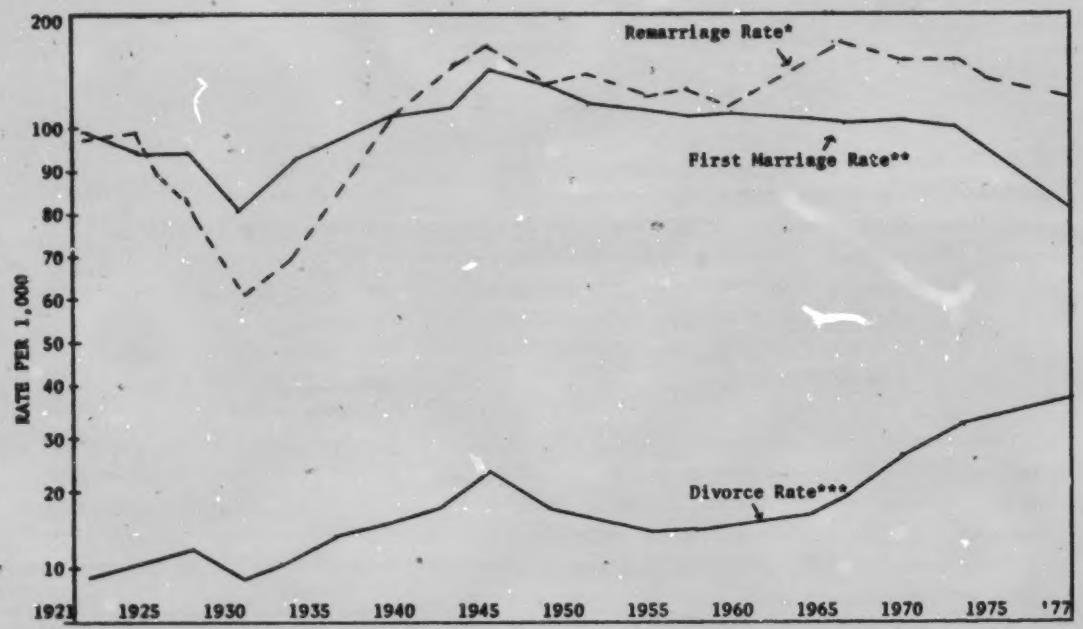
Of course, the "average" family in those reports really didn't exist, except as an interesting statistical construct. But even as a statistical construct, the "average" family has become increasingly unsatisfactory as a barometer of change in the family. And, in fairness, reports that describe the central tendencies in families have become less common, and many reports now describe the differing types and conditions of families in detail. Families in the United States always have varied in makeup, ages, number of children, education, income, health status, and housing. Statistics can be misleading, if, by describing the "average" family, they fail to provide much insight into the family itself, what is happening to it, and what are its needs.

It is not within the scope of this brief chapter to attempt so ambitious a task as describing the changing dynamics of families, the interaction between the family and the broader social context, or the changing needs of families. The purpose of this chapter is much more modest: to go somewhat beyond a bare statistical description of the family, and to describe its current status and some of the trends that have been shaping it. Unfortunately, there is a lack of comparable data across ethnic groups; for many purposes, only black-white comparisons are possible. Lack of these data necessarily limits the comprehensiveness of any assessment of status and trends.

As will be discussed, the changing role of women coupled with the changing mix of family types have produced some fundamental changes in the socioeconomic status of families. The nuclear family (consisting of a husband, wife, and children) is not – despite gloomy predictions – on its way to extinction. But it would be misleading to say it is "average." When mortality rates were much higher, say, in the early 1900s, many single-parent families were created by the death of one spouse – a woman might die in childbirth, for example; and programs were implemented to provide support to families in which the husband was killed on the job.

Although death rates have fallen markedly, and therefore contribute less to the formation of single-parent families than they used to, divorce and the tendency of young parents not to marry are contributing more. As Exhibit 5.1 shows, the trend in increasing divorce rates is a long-standing one. Though there have been some periods of decline (especially after the peak reached about the end of World War II), divorce rates have reached an all time high.

Exhibit 5.1 Rates of First Marriage, Divorce, and Remarriage for U. S. Women: 1921-1977



**First marriages per 1,000 single women 14 to 44 years old

***Divorces per 1,000 married women 14 to 44 years old

*Remarriages per 1,000 widowed and divorced women 14 to 54 years old

Sources: Adapted with permission from Hugh Carter and Paul G. Glick, Marriage and Divorce: A Social and Economic Study. Rev. ed. (Cambridge, Mass.: Harvard University Press, 1976). Figure 13.1, p. 394, with computations added for 1975-77.
This graph reproduced from Population Reference Bureau, Inc. Marrying, divorcing, and living together in the U. S. today. Population Bulletin, February 1979, 32(5). (Updated reprint)

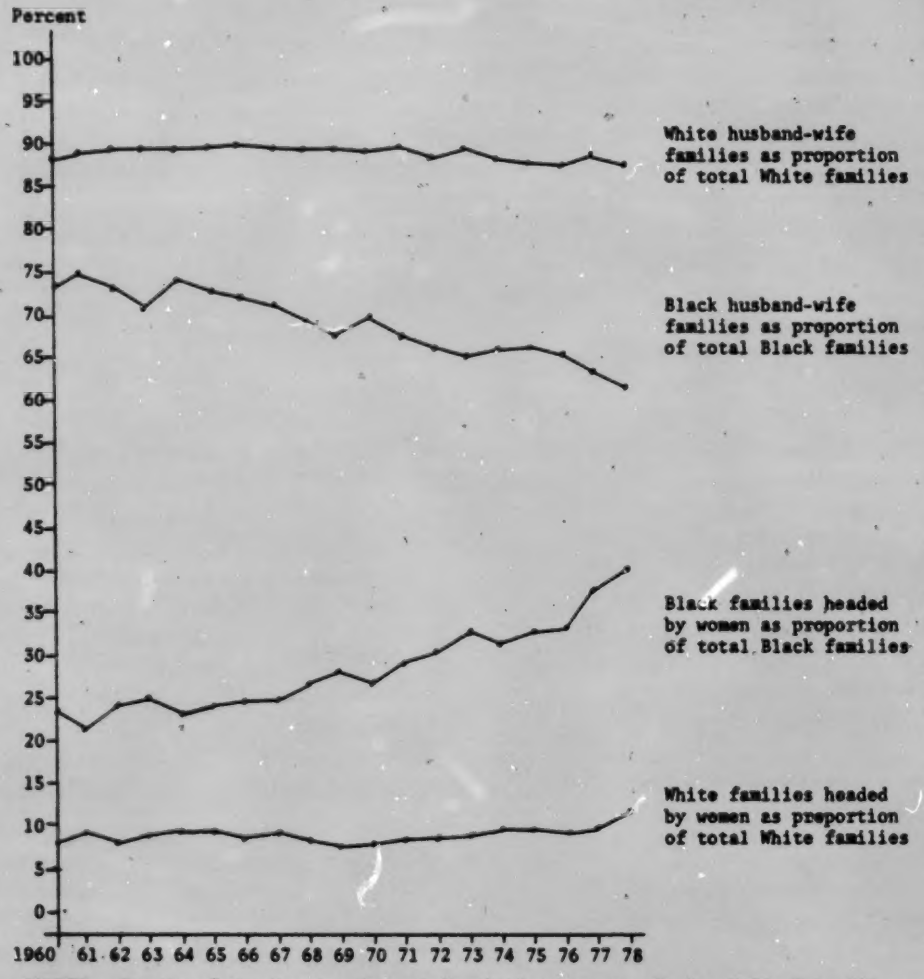
Marriage rates (both first marriage and remarriage) have fallen somewhat in recent years. First marriage rates, for instance, have been falling for about 20 years, as shown in Exhibit 5.1. Part of the reason for the decline over this period is the fact that many people – especially young women – are postponing marriage.

The net impact of these and other trends on the composition of families is discussed by Farley and Bianchi (1979), and differences between black families and white families are shown in Exhibit 5.2. The change in the percentage of white families having both husband and wife has shifted comparatively slowly since about 1960, while changes have occurred more rapidly among black families.

Economic and other factors have been cited as part of the reason why there has been an increase in the percentage of female-headed families. Ross and Sawhill (1975) cited, for example, the changing role and status of women, more financial independence

Exhibit 5.2 Husband-Wife Families and Families Headed by a Woman as a Proportion of Total Families, by Race: 1960 to 1978

(Data for 1960 through 1967 refer to Whites and non-Whites)



SOURCE: Bureau of the Census, Current Population Reports, Series P-20, Nos. 106, 122, 125, 139, 153, 164, 173, 191, 200, 218, 233, 246, 258, 276, 282, and 307; Series P-60, Nos. 107 and 116.
This graph reproduced from: U. S. Bureau of the Census. Census Bureau conference on issues in federal statistical needs relating to women. Current Population Reports, Special Studies, 1978, Series P-23, No. 83, Figure 1.

through employment and rising wages, and rising availability and amount of unearned income through transfer (welfare) payments. (As will be discussed later in this chapter, however, low income and poverty are being concentrated increasingly among female-headed families, because they typically have fewer wage earners than other families and because there is increased reliance on unearned income.)

Data for households (both family and nonfamily), shown in Exhibit 5.3, reflect the trend in female-headed families. Type of household is shown for whites, blacks, and persons of Spanish origin. The total number of households is shown, along with the number and percentage of family and nonfamily households.

Family households – the households most relevant to this chapter – are divided in Exhibit 5.3 into families with a married couple, those headed by a male, and those headed by a female. Between 1970 and 1979, the number of family households (all races) increased by 11.7%. The increase in black family households was 20.3%, compared with an increase of about half that for whites (9.8%). Family households of Spanish origin persons increased 35.7% over this same period.

Considering only married couple households rather than all family households shows a different trend. The increase for persons of Spanish origin was 29.0%, compared with a 6.3% increase among whites. For blacks, there was a percentage decrease of 2.3% in married couple households. This percentage decrease reflects an absolute decline from about 3.3 million to 3.2 million married couple households among blacks.

Exhibit 5.3 also shows that the tendency for an increase in female-headed families between 1970 and 1979 held for persons of Spanish origin (72.3%). A somewhat smaller increase was shown for blacks (71.7%), and the smallest percentage increase was for whites (40.1%). Across all races, there was roughly a 2.7 million increase in the number of female-headed families between 1970 and 1979.

Over this same period, there was roughly a 400,000 increase in the number of male-headed families (about one-seventh the increase in the number of female-headed families). The overall percentage increase in male-headed families (31.6%) also was smaller than the percentage increase for female-headed families (49.5%). The tendency for the increase in female-headed families to be greater than the increase for male-headed families held for all ethnic groups shown in Exhibit 5.3.

Employment and Income of Families

The marked changes in the composition of the family suggests, accurately, that family income and employment patterns also have changed. Trends in median family income – irrespective of type of family – are shown for different ethnic groups in Exhibit 5.4. For whites, the increase in median family income was from $3,157 to $18,368 between 1947 and 1978; for blacks and other races over this period the increase was from $1,614 to $11,754. Over this same period, the percentage increase for blacks and other races (728%) was larger than the increase for whites (582%).

More recent trends, separated out for whites, blacks as a distinct group, and persons of Spanish origin between 1972 and 1978 also are shown in Exhibit 5.4. (Data are shown

Exhibit 5.3 Households by Type and Race and Spanish Origin of Householder: 1970 and 1979

(Numbers in thousands)

Subject	1979		1970		Percent change: 1970-79
	Number	Percent	Number	Percent	
ALL RACES					
Total households	77,330	100.0	63,401	100.0	22.0
Family households	57,498	74.4	51,456	81.2	11.7
Married couple	47,662	61.6	44,728	70.5	6.6
Male head, no wife present	1,616	2.1	1,228	1.9	31.6
Female head, no husband present	8,220	10.6	5,500	8.7	49.5
Nonfamily households	19,831	25.6	11,945	18.8	66.0
WHITE					
Total households	68,028	100.0	56,602	100.0	20.2
Family households	50,677	74.5	46,166	81.6	9.8
Married couple	43,613	64.1	41,029	72.5	6.3
Male head, no wife present	1,323	1.9	1,038	1.8	27.5
Female head, no husband present	5,741	8.4	4,099	7.2	40.1
Nonfamily households	17,351	25.5	10,436	18.4	66.3
BLACK					
Total households	8,066	100.0	6,223	100.0	29.6
Family households	5,840	72.4	4,856	78.0	20.3
Married couple	3,240	40.2	3,317	53.3	-2.3
Male head, no wife present	267	3.3	181	2.9	47.5
Female head, no husband present	2,332	28.9	1,358	21.8	71.7
Nonfamily households	2,226	27.6	1,367	22.0	62.8
SPANISH ORIGIN[1]					
Total households	3,291	100.0	2,303	100.0	42.9
Family households	2,719	82.6	2,004	87.0	35.7
Married couple	2,084	63.3	1,615	70.1	29.0
Male head, no wife present	106	3.2	82	3.6	29.3
Female head, no husband present	529	16.1	307	13.3	72.3
Nonfamily households	572	17.4	299	13.0	91.3

[1]Persons of Spanish origin may be of any race. Spanish-origin data for 1970 were derived from 5-percent sample results of the 1970 census.

SOURCE: U. S. Bureau of the Census. Population characteristics: Households and families by type: March 1979 (Advance Report). Current Population Reports, October 1979, Series P-20, No. 345, Table 1, p. 2.

for 1972 because this is the first year for which they were tabulated separately for each group.) Over this period, the percentage increase was 59% for whites, 48% for blacks, and 54% for families with a head of Spanish origin. These relative gains reflect in part the changing proportions of female-headed families, since female-headed families tend to have lower income than other types of families.

Exhibit 5.4 Family Income in 1947, 1950, 1955, 1960, 1965, and 1970 to 1978--Families by Total Money Income, by Race and Spanish Origin of Head

(In current dollars. Families as of March of the following year. For meaning of symbols, see text.)

TOTAL MONEY INCOME	1978	1977	1976	1975	1974[r]	1974	1973	1972	1971	1970	1965	1960	1955	1950	1947
ALL RACES															
Number...thousands.....	57804	57215	56710	56245	55698	55712	55053	54373	53296	52227	48509	45539	42889	39929	37237
Median income[1]...dollars...	17640	16009	14958	13719	12902	12836	12051	11116	10285	9867	6957	5620	4418	3319	3031
WHITE															
Number...thousands.....	50910	50530	50083	49873	49440	49451	48919	48477	47641	46535	43497	41123	38982	(NA)	34120
Median income[1]...dollars...	18368	16740	15537	14268	13408	13356	12595	11549	10672	10236	7251	5835	4613	3445	3157
BLACK AND OTHER RACES															
Number...thousands.....	6804	6685	6627	6372	6258	6262	6134	5896	5655	5413	4782	4333	3907	(NA)	3117
Median income[1]...dollars...	11754	10142	9821	9321	8578	8265	7596	7106	6719	6516	5993	3230	2544	1869	1614
BLACK															
Number...thousands.....	5906	5806	5804	5586	5491	5498	5440	5265	5157	4928	(NA)	(NA)	(NA)	(NA)	(NA)
Median income[1]...dollars...	10879	9563	9242	8779	8006	7808	7269	6864	6440	6279	(NA)	(NA)	(NA)	(NA)	(NA)
SPANISH ORIGIN OF HEAD[2]															
Number...thousands.....	2741	2764	2583	2499	2475	2477	2365	2312	(NA)	(NA)	(NA)	(NA)	(NA)	(NA)	(NA)
Median income[1]...dollars...	12566	11421	10259	9551	9540	9559	8715	8183	(NA)	(NA)	(NA)	(NA)	(NA)	(NA)	(NA)

[r] Based on revised methodology.

[1] Since medians were calculated using more detailed intervals than those shown above, they will not be the same as those calculated using the above intervals.

[2] Persons of Spanish origin may be of any race.

NOTE: For the years 1960 to 1970, the number of white and black and other races families will not add to all races because the numbers for all races were adjusted to population controls based on the 1970 census. These controls are not available by race.

SOURCE: U. S. Bureau of the Census. Money income and poverty status of families and persons in the United States: 1978 (Advance Report). Current Population Reports, November 1979, Series P-60, No. 120, Table 3, p. 12.

In regard to the percentage of families below the poverty level, Exhibit 5.5 shows that family size as well as ethnicity are relevant factors. For example, of families with seven or more persons, 15.7% of white families, 41.3% of black families, and 35.5% of Spanish origin families are below the poverty level. Among blacks, the lowest poverty rate is for two-person families, and percentage of families below the poverty level increases with family size. In white and Spanish origin families, the lowest poverty rate is for families with four persons; families with two or three, or more than 5 persons, have higher poverty rates than four-person families.

Although there have been increases in income and a general decline in the poverty rate, the trend is very different depending upon whether there is a male householder present. Exhibit 5.6 shows the trend in number of families below the poverty level. The solid line shows the trend for families in which there was a male householder; the dashed line shows the trend for families with a female householder but in which no male is present. The number of families below the poverty rate has dropped considerably, as the overall poverty rate fell from 22% to 12% between 1959 (the first year for which poverty data are available) and 1977. However, as Exhibit 5.6 shows, from about 1969 there has been a gradual increase in the number of female households below the poverty level; this increase was from 1.8 million to 2.6 million families. Data reported by the Bureau of the Census (upon which Exhibit 5.6 is based, but not presented here) show that female-headed families comprise an increasingly large percentage of those families below the poverty level. As a percentage of all families below the poverty level, female-headed families were 36% of the total in 1969 and 49% of the total in 1977.

The greatest over-representation of families below the poverty level is for black female households in which no spouse is present. Bureau of the Census data indicate that there was over a 50% increase (from 740,000 to 1.2 million) in the number of such families between 1969 and 1977. These families also comprised a larger percentage of the black families below poverty: female households (no spouse present) accounted for 54% of the poor black families in 1969, and 71% in 1977. Exhibit 5.7 illustrates trends in poverty rates.

The poverty rate in 1977 for all families with a female householder was 31.7% compared with 5.5% for all other families. The trend between 1959 and 1977 shows a substantial decrease in poverty levels, for both female household families and all other families with the largest decrease occurring between 1959 and 1977. The black and white "all other" families category shows very substantial decreases in poverty rate between 1959 and 1977 (though the decreases between 1959 and 1969 were more substantial than those between 1969 and 1977). Among female households (no husband present), decreases in poverty rates also occurred, though these were much smaller than for "all other" families. For white female households (no spouse present) the decrease was from 34.8% to 24.0%; smaller decreases, from 65.4% to 51.9%, occurred for black female households. Thus, there is an increasing tendency for poverty level persons to be concentrated in black families with a female householder.

The pattern of poverty discussed above is not simply a matter of falling incomes among blacks vs. whites, nor is it simply a matter of the income differential between female-headed and husband-wife families. For example, as Exhibit 5.8 shows, there have been increases in average incomes for both female-headed and husband-wife households,

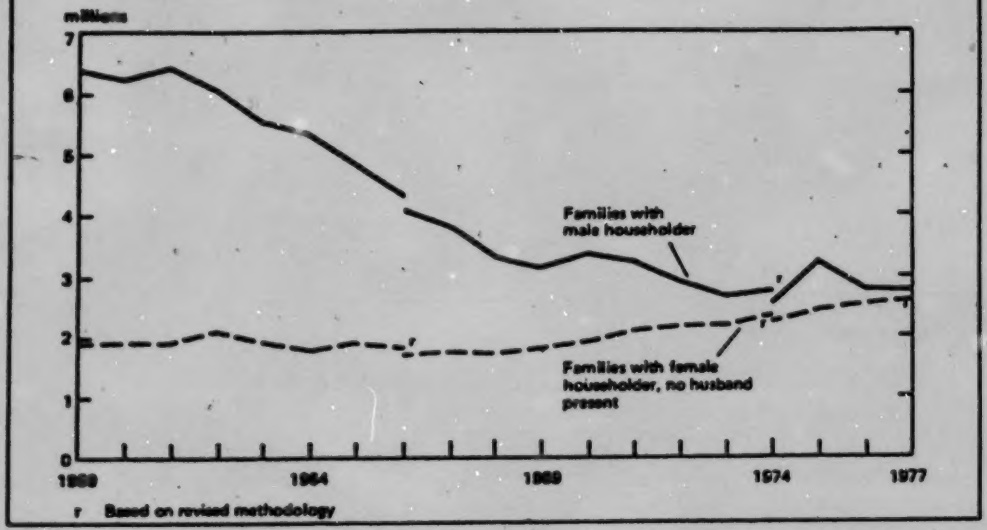
Exhibit 5.5 Selected Characteristics of Families--Poverty Status in 1978 of All Families and Families with Female Head, by Race and Spanish Origin of Head

(Numbers in thousands. Families as of March 1979. For meaning of symbols, see text.)

SELECTED CHARACTERISTICS	TOTAL			WHITE			BLACK			SPANISH ORIGIN[1]		
		BELOW POVERTY LEVEL			BELOW POVERTY LEVEL			BELOW POVERTY LEVEL			BELOW POVERTY LEVEL	
	TOTAL	NUMBER	PERCENT OF TOTAL	TOTAL	NUMBER	PERCENT OF TOTAL	TOTAL	NUMBER	PERCENT OF TOTAL	TOTAL	NUMBER	PERCENT OF TOTAL
ALL FAMILIES												
TOTAL	57804	5280	9.1	50910	3523	6.9	5906	1622	27.5	2741	559	20.4
AGE OF HEAD												
14 to 24 years	3837	710	18.5	3239	427	13.2	542	266	49.0	316	97	30.6
25 to 34 years	13478	1485	11.0	11601	961	8.3	1579	480	30.4	837	187	22.4
35 to 44 years	11754	1081	9.2	10256	707	6.9	1259	335	26.6	662	131	19.8
45 to 54 years	10883	729	6.7	9644	502	5.2	1076	212	19.7	457	64	14.0
55 to 59 years	5150	276	5.4	4671	192	4.1	401	80	19.9	162	23	14.3
60 to 64 years	4192	288	6.9	3797	213	5.6	348	72	20.6	92	9	10.1
65 years and over	8510	712	8.4	7703	520	6.8	701	178	25.4	214	47	22.0
SIZE OF FAMILY												
2 persons	22485	1806	8.0	20430	1368	6.7	1804	411	22.8	674	144	21.3
3 persons	12975	1114	8.6	11360	738	6.5	1412	346	24.5	638	109	17.1
4 persons	12037	970	8.1	10573	630	6.0	1224	316	25.8	617	101	16.3
5 persons	6089	652	10.7	5232	388	7.4	693	241	34.7	393	85	21.6
6 persons	2524	352	13.9	2120	211	9.9	353	135	38.3	206	46	22.1
7 persons or more	1694	387	22.8	1195	188	15.7	420	174	41.3	213	76	35.5
MEAN SIZE OF FAMILY	3.31	3.6	...	3.25	3.42	...	3.74	3.99	...	4.08	4.19	...

[1]Persons of Spanish origin may be of any race.
[2]Restricted to families with civilian heads.
SOURCE: U. S. Bureau of the Census. Money income and poverty status of families and persons in the United States: 1978 (Advance Report). Current Population Reports, November 1979, Series P-60, No. 120, Table 21, p. 33.

Exhibit 5.6
Families Below the Poverty Level by Sex of Householder: 1959 to 1977



SOURCE: U, S. Bureau of the Census. Characteristics of the population below the poverty level: 1977. Current Population Reports, March 1979, Series P-60, No. 119, Figure 2, p. 4.

for both blacks and whites. If black husband-wife households and similar white households are compared, there is a larger percentage increase and absolute income increase between 1960 and 1976 for blacks. Among female-headed households, there has been a similar trend: both the percentage increase and absolute income increase have been larger for blacks.

The increase in number of black female-headed families (as shown in Exhibit 5.6) is not caused simply by increasing poverty rates, since, as shown in Exhibit 5.7, poverty rates have fallen. Nor, as Exhibit 5.8 shows, is it caused simply by income differentials. Part of the reason is that the number of black female-headed families has risen faster than the poverty rate has fallen; hence, more are below the poverty level. Another factor is that black family size tends to be larger than white family size, as shown in Exhibit 5.9. Black female-headed families tend to be almost as large as "all families," indicating that, in many cases, an adult male (who might be a wage earner) is "replaced" by a child who is less likely to be a wage earner. For white and Spanish origin families, those with female heads are somewhat smaller than black female-headed families and are therefore perhaps less likely to fall below the poverty level.

Exhibit 5.10 reflects both lower income and larger size of black families and shows per capita income (total income, divided by the number of persons in the household).

Exhibit 5.7 Persons Below the Poverty Level by Family Status and Race: 1959, 1969, and 1977

Family status and race	Poverty rate		
	1977	1969	1959
ALL RACES			
Total	11.6	12.1	22.4
65 years old and over	14.1	25.3	35.2
Family members	10.2	10.4	20.8
Householder	9.3	9.7	18.5
Female, no husband present	31.7	32.7	42.6
All other	5.5	6.9	15.8
Other family members	3.9	7.2	15.9
Unrelated individuals	22.6	34.0	46.1
WHITE			
Total	8.9	9.5	18.1
65 years old and over	11.9	23.3	33.1
Family members	7.5	7.8	16.5
Householder	7.0	7.7	15.2
Female, no husband present	24.0	25.7	34.8
All other	4.8	6.0	13.3
Other family members	4.6	5.8	13.3
Unrelated individuals	20.4	32.1	44.1
BLACK			
Total	31.3	32.2	55.1
65 years old and over	36.3	50.2	62.5
Family members	30.5	30.9	54.9
Householder	28.2	27.9	48.1
Female, no husband present	51.0	53.3	65.4
All other	13.5	17.9	43.3
Other family members	17.4	20.0	44.1
Unrelated individuals	37.0	46.7	57.0

SOURCE: U. S. Bureau of the Census. Characteristics of the population below the poverty level: 1977. Current Population Reports, March 1979, Series P-60, No. 119, Table C, p. 5.

Thus, while the increase in husband-wife family per capita incomes was very close ($1,589 vs. $1,517), per capita gains for white female-headed households were larger than those for black female-headed households. This occurred despite the fact that percentage increase and absolute income increase were greater for black than white female-headed families, as is shown in Exhibit 5.8.

Exhibit 5.8 Changes in Income Level, by Type of Family and Race: 1960 and 1976

(Constant 1975 dollars)

Type of household and source	Whites				Blacks			
	1960	1976	Change	% Change	1960	1976	Change	% Change
ALL HOUSEHOLDS								
Average income	11,218	14,335	+3,117	+28%	6,525	9,222	+2,697	+41%
From earnings	9,950	11,841	+1,891		5,807	7,461	+1,654	
From nonearnings	1,268	2,494	+1,226		718	1,761	+1,043	
HUSBAND-WIFE HOUSEHOLDS								
Average income	12,562	17,110	+4,548	+36%	7,667	12,796	+5,129	+67%
From earnings	11,406	14,748	+3,342		7,077	11,273	+4,196	
Earnings of husband	9,110	11,395	+2,285		5,007	7,332	+2,325	
Earnings of wife	1,407	2,447	+1,040		1,227	3,007	+1,780	
Earnings of other adults	839	838	-1		797	883	+86	
Earnings of teenagers	50	68	+18		46	51	+5	
From nonearnings	1,156	2,361	+1,205		590	1,523	+933	
FEMALE-HEADED HOUSEHOLDS								
Average income	6,266	7,414	+1,148	+18%	4,382	5,835	+1,453	+33%
From earnings	4,518	4,419	-99		3,405	3,746	+341	
Earnings of female head	2,801	3,262	+461		1,731	2,719	+988	
Earnings of other adults	1,692	1,127	-565		1,626	992	-634	
Earnings of teenagers	25	30	+5		48	35	-13	
From nonearnings	1,748	2,995	+1,247		977	2,089	+1,112	

SOURCE: Bureau of the Census. 1960 Census of Population, Public Use Sample Tape; Annual Demographic File, March 1976.
This graph reproduced from: U. S. Bureau of the Census. Census Bureau conference on issues in federal statistical needs relating to women. Current Population Reports, Special Studies, 1978, Series P-23, No. 83, Table 5.

Exhibit 5.9 Average Size of Families by Poverty Status, Race, and Spanish Origin of Head in 1978

TYPE OF FAMILY	POPULATION					
	White		Black		Spanish Origin	
	All Families	Below Poverty	All Families	Below Poverty	All Families	Below Poverty
All Types	3.25	3.42	3.74	3.99	4.08	4.19
Female-headed	2.86	3.15	3.63	3.90	3.35	3.56

SOURCE: U. S. Bureau of the Census. Money income and poverty status of families and persons in the United States: 1978 (Advance Report). Current Population Reports, November 1979, Series P-60, No. 120, adapted from Table 21.

Exhibit 5.10 Per Capita Income, by Type of Household and Race: 1960 and 1976

(Constant 1975 dollars)

Type of Household	Whites			Blacks		
	1960	1976	Change	1960	1976	Change
Total.....	3,466	5,041	+1,575	1,699	2,911	+1,212
Husband-wife.....	3,413	5,002	+1,589	1,693	3,210	+1,517
Female-headed.....	3,266	4,197	+913	1,422	2,031	+609
Difference between husband-wife and female-headed.....	147	805	(X)	271	1,179	(X)

X = Not applicable.
Source: Bureau of the Census. 1960 Census of Population, Public Use Sample Tape; Annual Demographic File, March 1976.
This graph reproduced from: U. S. Bureau of the Census. Census Bureau conference on issues in federal statistical needs relating to women. Current Population Reports, Special Studies, 1978, Series P-23, No. 83, Table 4, p. 58.

Women in Families

Nearly all data on the family – and on children in families – are affected by the changing role of women. The changing role of women is visible especially in regard to labor force participation. In fact, in many families, there is an increasing reliance on two or more earners for maintaining family income levels. Another example of this trend is the prevalence of young couples who have postponed having children, and who have the advantage of a joint income. Economic consequences, brought about by the changing role of women, have been so profound that this section focuses on them.

It would be inaccurate to characterize changes in the role of women and employment patterns as uniformly affecting families. As Exhibit 5.11 shows, for example, there has been no simple pattern of change in the 1970s. The data in Exhibit 5.11 show that the large majority of families not headed by a husband and wife continue to be maintained by women rather than men. The data also show that the percentage distributions for husband-wife families, families maintained by women, and families maintained by men all show an increase in families in which there is no earner; of these, the largest increase in no-earner families was for husband-wife families. The percentage of families in which there was only one earner decreased between 1970 and 1979 for husband-wife families (from 36.6% to 29.7%), whereas it increased for families maintained by women (from 44.2% to 48.6%) and for families maintained by men (from 41.9% to 45.1%). (Note that these data do not reflect trends among working women not in families, whose employment rates generally have increased.)

The data, however, do not support the conclusion that families maintained by men or women are augmenting incomes by increasing the number of wage earners. Although the percentage of families with one earner (maintained by women or maintained by men) increased, the percentage of such families in which there were two wage earners decreased between 1970 and 1979. The percentage distribution decrease for families maintained by women was from 34.3% to 28.1%; for families maintained by men, the decrease was slightly smaller (from 48.2% to 43.4%). In contrast to the data for families maintained by women (or men), the data for husband-wife families showed an increase in the percentage distribution of families in which there were two earners (from 56.6% to 59.6%). Thus, compared with 1970 figures, families maintained by women (or men) lost potential income, simply because of a decline in the number of families in which there were two or more earners. During the same period, however, the earning potential increased for husband-wife families because of the increase in families with two or more earners.

Exhibit 5.12 provides a longitudinal look at the role of women in the labor force in this century. The number of women in the labor force has increased nearly 10-fold since 1900, to approximately 43 million in 1979. Expressed as a percentage of the labor force, the involvement of women more than doubled between 1900 and 1979. The percentage of women who were in the labor force showed roughly the same degree of increase over this period, from a participation rate of 20.0% in 1900 to 50.8% in 1979.

The labor force participation rate of women varies by marital status. Exhibit 5.13 reflects these differences, and provides a comparison with labor force participation rates of men between 1970 and 1978. For widowed persons of each sex, the trend has been for

Exhibit 5.11 Number of earners in previous year, by type of family in March 1970 and March 1979

Number of earners during previous year, relationship and type of family	March 1970		March 1979	
	Number (in thousands)	Percent distribution	Number (in thousands)	Percent distribution
Total families	51,237	—	57,804	—
Husband-wife families, total	44,436	100.0	47,692	100.0
No earners	3,022	6.8	5,101	10.7
1 earner	16,268	36.6	14,173	29.7
Husband only	15,133	34.1	12,194	25.6
Wife only	797	1.8	1,477	3.1
Other relative only	339	.8	502	1.1
2 or more earners	25,145	56.6	28,418	59.6
Husband and wife 1/	20,327	45.7	24,253	50.9
Husband and other, not wife	4,517	10.2	3,583	7.5
Husband non-earner	302	.7	582	1.2
Other families, total	6,801	—	10,113	—
Maintained by women 2/ total	5,573	100.0	8,458	100.0
No earners	1,194	21.4	1,984	23.2
1 earner	2,468	44.2	4,114	48.6
2 or more earners	1,911	34.3	2,380	28.1
Maintained by men 2/ total	1,239	100.0	1,655	100.0
No earners	121	9.7	189	11.3
1 earner	520	41.9	746	45.1
2 or more earners	598	48.2	719	43.4

1/ May also include sons, daughters, or other family members.

2/ Includes only divorced, separated, widowed or never-married persons.

NOTE: Due to rounding, sums of individual items may not equal totals.

SOURCE: U. S. Department of Labor. Multi-earner families increase. U. S. Department of Labor News, October 31, 1979.

Exhibit 5.12

Women in the labor force, selected years, 1900-1978

Year	Women in the labor force (thousands)	Women in the labor force as a percent of:	
		Total labor force	All women of working age
1900	4,999	18.1	20.0
1910	8,076	21.2	23.4
1920	8,229	20.4	22.7
1930	10,396	21.9	23.6
1940	13,007	24.6	25.8
1945	19,304	29.2	35.8
1950	18,412	28.8	33.9
1955	20,584	30.2	35.7
1960	23,272	32.3	37.8
1965	26,232	34.0	39.3
1970	31,560	36.7	43.4
1971	32,132	37.0	43.4
1972	33,320	37.4	43.9
1973	34,561	38.0	44.7
1974	35,892	38.5	45.7
1975	37,087	39.1	46.4
1976	38,520	39.7	47.4
1977	40,067	40.3	48.5
1978	42,002	41.0	50.1
1979 (6-month average January-June)	43,094	41.2	50.8

NOTE: Labor force data for 1900 to 1930 refer to gainfully employed workers. For 1900 to 1945, data are for persons 14 years of age and over; beginning in 1950, data are for persons 16 years of age and over.

SOURCE: Data for 1900 to 1970, *Historical Statistics of the United States, Colonial Times to 1970*, Bureau of the Census; data for 1975 to 1979, *Employment and Earnings*, January 1979 and July 1979 issues, Bureau of Labor Statistics.

This graph reproduced from: U.S. Department of Labor. Women in the labor force: Some new data series. Report 575. Washington, D.C.: Bureau of Labor Statistics, 1979, Table 1, p. 1.

the labor force participation rates to decline; in the case of women, the decline was from a labor force participation rate of 26.4% to 22.4% (for men, the decline was somewhat smaller, from 31.9% to 30.5%). Labor force participation rates of divorced men and women increased, and in fact, were approximately equal over this period. For divorced women, the increase was from 71.5% to 74.0%; and for divorced men, the increase was from 76.0% to 80.7%.

Exhibit 5.13 shows a somewhat different pattern in labor force participation for males and females who are married. When the spouse is absent, labor force participation rates increase for both sexes, though the increase is larger for men (from 61.3% to 77.4%) than for women (from 52.1% to 56.8%). When the spouse is present, however, there is an increase in labor force participation rate for women and a decrease for men. For married

Exhibit 5.13

Civilian labor force by sex and marital status, March 1970 and 1978

Sex and marital status	Civilian labor force			
	Number (in thousands)		Labor force participation rate	
	March 1970	March 1978	March 1970	March 1978
Both sexes, total	81,893	99,437	58.1	63.7
Men, total	53,489	57,486	77.6	76.5
Never married	9,421	13,978	69.4	69.2
Married, wife present	35,123	36,577	86.6	81.6
Married, wife absent	1,853	1,703	81.3	77.4
Widowed	672	567	31.9	33.5
Divorced	1,191	2,711	76.0	80.7
Women, total	31,333	40,971	42.6	48.7
Never married	6,966	10,222	53.9	60.5
Married, husband present	18,377	22,788	40.8	47.6
Married, husband absent	1,422	1,822	62.1	66.8
Widowed	2,542	2,388	26.4	22.4
Divorced	1,927	3,886	71.5	74.8

NOTE: Because of rounding, sums of individual items may not equal totals.

Source: Johnson, B. L. Changes in marital and family characteristics of workers, 1970-78. Special Labor Force Reports--Summaries. Washington, D.C.: Office of Current Employment Analysis, Bureau of Labor Statistics, April 1979, Table 2.

women (spouse present), the increase was from 40.8% to 47.6%; whereas, for men, the decrease was from 86.6% to 81.6%. Thus, in husband-wife families, there appears to be a tendency for labor force participation rates to become more equal, because of falling rates for men and increasing rates for women.

Exhibit 5.14 shows the median earnings of male and female full-time workers between 1967 and 1978. As was shown earlier in Exhibit 5.8, incomes have been increasing steadily; this trend also is evident in Exhibit 5.14. Exhibit 5.14, however, shows weekly earnings for both sexes, and earnings for women are shown as a percentage of those for men. Viewed as a percentage of those for men, women's earnings have changed little over this period, comprising 61% to 63% of men's earnings.

Factors such as the differential earnings of women (as shown in Exhibit 5.14) and labor force participation rates are reflected in Exhibit 5.15. Exhibit 5.15 shows the median income of families in 1978, by type of family. For instance, in families in which there is only one earner, median income is highest for husband-wife families ($15,027). Median income is somewhat lower for families headed by men in which there is one earner ($13,087) and lower still for families with one earner headed by women ($7,977).

This same general pattern also occurred in families in which there was no earner, with female-headed families having the lowest income ($3,910). Exhibit 5.15 shows percentage distributions of type of family and number of earners. Families headed by

Exhibit 5.14

Median usual weekly earnings of full-time wage and salary workers by sex, 1967-78

Year	Usual weekly earnings		Women's earnings as percent of men's
	Women	Men	
May of:			
1967	$ 78	$125	62
1969	86	142	61
1970	94	151	62
1971	100	162	62
1972	106	168	63
1973	116	188	62
1974	124	204	61
1975	137	221	62
1976	145	234	62
1977	156	253	62
1978	166	272	61

SOURCE: Bureau of Labor Statistics.

This graph reproduced from: U. S. Department of Labor. Women in the labor force: Some new data series. Report 575. Washington, D. C.: Bureau of Labor Statistics, 1979, Table 9, p. 7.

women, as compared with husband-wife families and families headed by men, had a considerably higher percentage of families in which there were no earners, and a considerably lower percentage of families in which there were two earners. In part, this reflects the trend in the 1970s shown previously in Exhibit 5.11. Thus, by a substantial margin, families with the lowest income were those headed by women – but in which there were no earners. In families headed by women (and also in husband-wife families) income increased markedly when there were one or two earners as compared with families without earned income.

There are many factors that affect family income, some of which were discussed in this chapter. Several factors (including age, race, wage rates, labor force participation, number of wage earners, occupation, and education) all tend to depress the income of families headed by women, as compared with husband-wife families. The fact that there has been a greater increase in female-headed families among blacks as compared with whites has aggravated the concentration of poverty in those families. Low income among black female-headed families also has been aggravated by the fact that these families (as compared with their white counterparts) have relatively more families with no earners and relatively fewer families with two or more earners (as shown in Exhibit 5.11).

Transfer (welfare) payments helped compensate families headed by women but were inadequate to raise many female-headed families above the poverty level. As Exhibit 5.6 indicated, there are over 2 million such families below the poverty level. Other data

suggest that nearly 1 million families had welfare assistance as their only income, and nearly all of them were below the poverty level.

Exhibit 5.15

Earners in families, relationship, and median family income in 1977, by type of family, March 1978

Item	Number (in thousands)	Percent distribution	Median family income in 1977
Husband-wife families, total	47,365	100.0	$17,720
No earners	5,066	10.7	6,935
1 earner	14,868	31.4	15,027
Husband only	12,930	27.3	15,786
Wife only	1,427	3.0	10,449
Other relative only	532	1.1	12,184
2 earners or more	27,451	57.9	21,064
Husband and wife	23,116	48.8	20,722
Husband and other, not wife	3,790	8.0	23,945
Husband nonearner	544	1.1	16,514
Headed by women,[1] total	8,238	100.0	7,785
No earners	2,095	25.4	3,910
1 earner	3,868	47.0	7,977
2 earners or more	2,272	27.6	13,701
Headed by men,[1] total	1,584	100.0	14,538
No earners	197	12.4	5,564
1 earner	707	44.4	13,067
2 earners or more	680	43.3	18,887

[1] Includes only divorced, separated, widowed, or never-married persons.
NOTE: Because of rounding, sums of individual items may not equal totals.

SOURCE: Johnson, B. L. Changes in marital and family characteristics of workers, 1970-78. Special Labor Force Reports--Summaries. Washington, D.C.: Office of Current Employment Analysis, Bureau of Labor Statistics, April 1979, Table 1.

Health Status

Ethnicity and economic status are among those factors related to health. Although differences among ethnic groups continue to exist, comparisons among those show, at least in some instances, that differences are growing smaller – apparently reflecting, in part, an overall trend in health status improvement. One of the indicators of health status is infant mortality. As shown in Exhibit 5.16, infant (as well as neonatal and post-neonatal) mortality rates have declined for racial groups shown. (Data are not tabulated separately for Hispanic populations.) Although large absolute differences remain, percent-

age decreases have been roughly parallel for each of these populations. The exception to this general pattern has been the relatively large decline in infant mortality in the American Indian population – from 82.1 deaths per 1,000 live births in 1950 to 15.6 deaths in 1977.

Exhibit 5.16 Infant, Neonatal, and Postneonatal Mortality Rates, According to Race: United States, Selected Years 1950-77

Mortality rate and year	Race				
	Black	American Indian	Chinese-American	Japanese-American	White
Infant mortality rate[1]	Number of deaths per 1,000 live births				
1950	43.9	82.1	19.3	19.1	26.0
1960[2]	44.3	49.3	14.7	15.3	22.9
1970[2]	32.6	22.0	8.4	10.6	17.8
1977[2]	23.6	15.6	5.9	6.6	12.3
Neonatal mortality rate[3]					
1970[2]	22.8	10.6	5.4	8.4	13.8
1977[2]	16.1	8.3	4.2	5.1	8.7
Postneonatal mortality rate[4]					
1970[2]	9.9	11.4	3.1	2.2	4.0
1977[2]	7.6	7.3	1.7	1.5	3.6

[1] Infant mortality rate is the number of deaths for infants under 1 year of age per 1,000 live births.
[2] Excludes deaths of nonresidents of the United States.
[3] Neonatal mortality rate is the number of deaths for infants within 28 days of birth per 1,000 live births.
[4] Postneonatal mortality rate is the number of deaths for infants within 28 days to 365 days of birth per 1,000 live births.

SOURCE: Division of Vital Statistics, National Center for Health Statistics: Selected data.
This graph reproduced from: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy) Table G.

In regard to "survival rate" changes over time, Exhibit 5.17 shows much the same general pattern as Exhibit 5.16. For each age group and sex, differences were quite large between white and all other groups in the early 1900s. While differences remained in 1977, they were smaller, both in an absolute and in a percentage difference sense. Convergence, however, is greater among whites and all other groups up to age 45 than for up to age 65. For instance, for every 100 born, there are 92.1 white males who reach age 45, as compared with 85.0 for all other males. This difference is larger for survival rates to age

Exhibit 5.17 Percent Surviving to 20, 45, and 65 Years of Age, According to Sex and Color: United States 1900-1902 to 1977

Age, sex, and color	Year					
	1900-1902[1]	1919-21[1]	1939-41	1959-61[2]	1969-71[2,3]	1977[2,3]
	Number of survivors per 100 born alive					
20 YEARS						
Male						
White	76.4	85.0	92.3	95.9	96.5	97.2
All other	56.7	79.1	86.8	93.1	94.3	96.0
Female						
White	79.0	87.3	94.0	97.1	97.6	98.2
All other	59.1	80.2	88.5	94.7	95.9	97.1
45 YEARS						
Male						
White	61.4	72.7	84.3	90.5	90.7	92.1
All other	39.2	56.6	67.5	82.1	80.2	85.0
Female						
White	64.7	74.9	87.9	94.2	94.6	95.7
All other	42.3	56.2	71.1	86.8	88.6	92.1
65 YEARS						
Male						
White	39.2	50.7	58.3	65.8	66.3	70.7
All other	19.0	34.0	35.9	51.4	49.6	55.8
Female						
White	43.8	54.3	68.7	80.7	81.6	83.8
All other	22.0	31.0	40.7	60.8	66.1	72.7

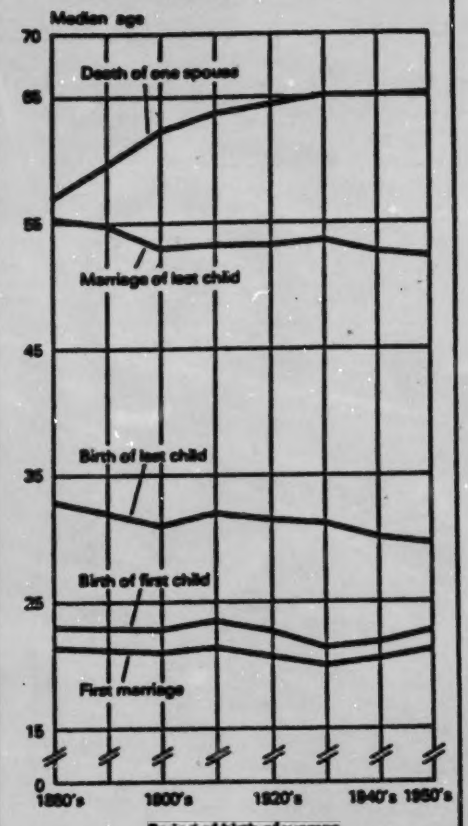
[1] Data are for groups of registration States as follows: 1900-1902, 10 States and the District of Columbia; 1919-21, 34 States and the District of Columbia. Figures for "all other, male" and "all other, female" include only the black population. However, in no case did the black population comprise less than 95 percent of the corresponding "all other" population.

[2] Alaska and Hawaii included beginning in 1959.

[3] Excludes deaths of nonresidents of the United States.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, 1975, Vol. II, Part A. DHEW Pub. No. (PHS) 79-1114. Public Health Service. Washington. U. S. Government Printing Office, 1979; Final Mortality Statistics, 1977. Monthly Vital Statistics Report, Vol. 28, No. 1, supplement. DHEW Pub. No. (PHS) 79-1120. Public Health Service. Hyattsville, Md. May 11, 1979.
This graph reproduced from: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy). Table J.

Exhibit 5.18
Median Age of Mothers at Selected Stages of the Family Life Cycle



SOURCE: U.S. Bureau of the Census. Perspectives on American fertility. Current Population Reports, Series P-23, No. 70, Figure 2-2, p. 16.

65, which are 70.7 for whites and 55.8 for all other males. Trends in survival rates – as well as trends discussed earlier – are reflected in Exhibit 5.18 which illustrates changes in the "family life cycle" that involve critical events in the family. As is shown in the figure, age of first marriage and birth of the first child have tracked one another closely. Similarly, birth of the last child and marriage of the last child have tracked one another.

The most prominent trend in Exhibit 5.18, however, is the increasing median age at which the death of a spouse occurs. Husband-wife families, therefore, are tending to have

a longer "life expectancy" than before; parents typically are living together longer after their children have married or otherwise left the household.

Although the foregoing "family life cycle" data may represent statistical tendencies, differences among ethnic groups in adult mortality rates imply differences in family life cycle, quite apart from those attributable to marriage and divorce rates. The best data illustrating this fact, separated out by race, are from 1970 and are shown in Exhibit 5.19. All comparisons are with the white population, so that 1.00 means that the mortality rate is exactly the same as that for whites. Thus, for persons, ages 45 to 54, mortality among blacks is 2.08 times that for whites. Rates also are higher for American Indians in that same age bracket, but are lower for the Chinese- and Japanese-American populations.

Exhibit 5.19 Mortality Ratios,[1] According to Race and Age: United States, 1970

Age	Race			
	Black	American Indian	Chinese-American	Japanese-American
	Mortality ratio			
All ages, crude	1.06	0.76	0.50	0.45
All ages, age adjusted	1.54	1.18	0.73	0.49
Under 5 years	2.00	1.67	0.45	0.61
5-14 years	1.42	1.60	0.78	0.65
15-24 years	1.83	2.69	0.45	0.59
25-34 years	2.94	3.48	0.43	0.40
35-44 years	2.72	2.79	0.53	0.46
45-54 years	2.08	1.67	0.59	0.46
55-64 years	1.63	1.00	0.76	0.43
65-74 years	1.35	0.81	0.93	0.43
75-84 years	0.98	0.70	0.80	0.56
85 years and over	0.67	0.56	0.52	0.64

[1] Excludes deaths of nonresidents of the United States.

NOTE: Ratios are computed by dividing the age-specific death rate of a specified racial or ethnic group by the death rates of the white population in that age group.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics. This graph reproduced from: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy) Table E, p. 18.

Other indicators of health status, from the Health Interview Survey of the National Center for Health Statistics, are shown in Exhibit 5.20. Data shown here are tabulated for blacks, Hispanics, and whites (all ages grouped). Data are shown separately for populations with incomes above $10,000 and those with lower incomes. In regard to self-assessment of their health by survey respondents, 19.1% of blacks rated their health as

"fair" or "poor," compared with 12.8% of Hispanics and 11.0% of whites. This same general pattern among the ethnic groups held up for the different income levels, though there were fewer "fair" or "poor" ratings among the higher income respondents. Limitation of activity (an indicant of chronic disease impact) and restricted activity and bed days were considerably lower for the higher income group, though there were no strong patterns among ethnic groups across indicators or income levels.

Exhibit 5.20 Selected Health Characteristics, According to Income, Age, and Race or Ethnicity: United States, Average Annual 1976-77

(Data are based on household interviews of a sample of the civilian noninstitutionalized population)

Income, age, and race or ethnicity	Population in thousands	Persons with-- Self-assessed health status as fair or poor	Limitation of activity	Some form of health insurance[1]	Restricted activity days[2]	Bed days[3]
ALL INCOMES[4]		Percent of population			Number per person per year	
All ages						
Total.....	211,400	12.3	13.9	88.6	18.0	7.0
Black.....	23,066	19.1	14.6	83.5	20.7	8.9
Hispanic.....	11,913	12.8	9.1	75.7	16.7	7.8
White.....	160,129	11.0	14.0	90.8	17.6	6.6
LESS THAN $10,000						
All ages						
Total.....	68,268	20.4	21.8	80.3	25.6	10.0
Black.....	11,961	23.5	19.2	79.3	25.1	10.5
Hispanic.....	5,681	17.2	12.0	66.2	21.3	9.9
White.....	44,555	19.5	23.8	82.9	26.2	9.8
$10,000 OR MORE						
All ages						
Total.....	124,002	7.4	9.3	94.3	13.7	5.2
Black.....	8,363	11.9	8.1	92.9	14.7	6.6
Hispanic.....	5,122	8.0	5.8	88.0	11.9	5.5
White.....	102,809	6.9	9.6	95.0	13.7	5.1

SOURCE: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy) Adapted from Table 1, p. 37.

In regard to health insurance, blacks are behind whites at each income level, though, in each case, health coverage is lowest for the Hispanic population. (These data do not imply necessarily that health coverage is adequate. They only reflect whether there is *any* form of health insurance coverage.)

Most health data are reported for individuals, not for families. Although lack of health data makes it difficult to describe the health status of the family *per se,* certain health-related issues seem especially relevant to families. Some of these are discussed briefly below.

Infant Mortality. One of the chronic health problems has been the high rate of infant mortality in the United States compared with other countries. Infant mortality stems from several factors, including poor maternal nutrition, inadequate prenatal health care, lack of medical services, maternal age and health (including cigarette, alcohol, and other drug use), and a variety of socioeconomic factors. Changes in the rate of infant mortality were shown in Exhibit 5.16, as an indicator of general health status.

Exhibit 5.21 shows the month in which prenatal care was initiated. Although the data are for live births (rather than for deaths), they are illustrative of the pattern of prenatal care by race and of trends over time. Generally paralleling the trend in infant mortality itself, there is a clear pattern of more timely prenatal care. Overall, there is a tendency, which has increased between 1970 and 1977, for women to obtain care in the first 2 or 3 months. In 1977, 50.2% of whites and 34.4% of blacks received prenatal care in the first 2 months. Although this is a substantial gap – probably accounting, in part, for the differences in infant mortality between the two groups – the 34.4% rate for blacks represents nearly a 10-point increase in care received during the first 2 months from 23.7% in 1970.

Earlier, in Exhibit 5.16, data were shown indicating large decreases in infant mortality among American Indians. This decrease is attributable, in part, to increased emphasis on maternal and child health services and Indian Health Service programs. In the case of maternal mortality, Public Health Service data show that the rate among American Indians was twice that of the overall U.S. rate in 1958; but in 1975-76 was actually lower than the overall U.S. rate.

Adolescent Pregnancy. Exhibit 5.22 shows fertility rates of women, ages 15 to 19, presented by the Population Reference Bureau, Inc. Based on these data, the report concluded that the rate of teenage pregnancy has declined recently, although the number of births involved (as opposed to the birth rate) has remained about the same. Their data suggest that the overall rate in 1974 was about what it was in 1920.

More recent data, reflecting the trend through 1977, are shown in Exhibit 5.23. Total live birth data show that the rate per 1,000 live births has declined for women, ages 18 to 19 – a trend that holds for both blacks and whites. The data, however, also show that the rates for the highest risk groups – those ages 10 to 14 and ages 15 to 17 – have changed very little between 1968 and 1977.

Adolescent childbearing is a salient health-risk factor. The problems stem, in part, from poor maternal nutrition or lack of prenatal care, but also stem from the physical immaturity of the mother. In fact, risk among very young mothers is similar to risk among older women above, say, 40 years of age. Low birthweight, as one consequence, is associated with increased risk of infant mortality. There are, in addition, a variety of medical complications and effects (including congenital defects and mental and physical

Exhibit 5.21 Live births, according to month of pregnancy prenatal care began and race: United States, reporting areas, 1970-77

(Data are based on the national vital registration system)

Race and year	All live births	Month of pregnancy prenatal care began								No prenatal care
		1st or 2nd month	3rd month	4th month	5th month	6th month	7th month	8th month	9th month	
		Percent distribution								
Total[1]										
1970	100.0	41.2	26.7	12.1	7.3	4.8	3.4	2.0	0.8	1.7
1971	100.0	41.4	27.2	12.2	7.2	4.7	3.1	1.8	0.7	1.6
1972	100.0	42.4	27.0	12.0	7.1	4.5	3.0	1.7	0.7	1.5
1973	100.0	43.8	27.0	11.6	6.8	4.2	2.8	1.7	0.7	1.3
1974	100.0	44.9	27.2	11.4	6.4	3.9	2.6	1.6	0.6	1.4
1975	100.0	45.5	26.8	11.4	6.3	3.9	2.6	1.5	0.6	1.3
1976	100.0	46.7	26.7	11.0	6.1	3.7	2.4	1.4	0.6	1.4
1977	100.0	47.4	26.6	10.9	6.0	3.5	2.3	1.3	0.5	1.4
White										
1970	100.0	44.5	27.9	11.3	6.2	3.9	2.7	1.6	0.7	1.2
1971	100.0	44.7	28.3	11.3	6.1	3.8	2.6	1.5	0.6	1.1
1972	100.0	45.7	27.9	11.1	6.0	3.7	2.4	1.4	0.6	1.1
1973	100.0	47.1	27.8	10.6	5.7	3.4	2.3	1.4	0.6	1.1
1974	100.0	48.0	27.9	10.4	5.4	3.2	2.2	1.3	0.5	1.0
1975	100.0	48.5	27.4	10.5	5.4	3.2	2.2	1.3	0.5	1.0
1976	100.0	49.6	27.2	10.1	5.2	3.1	2.0	1.2	0.5	1.1
1977	100.0	50.2	27.1	10.0	5.1	2.9	1.9	1.1	0.5	1.1
Black										
1970	100.0	23.7	20.6	16.2	13.1	9.8	6.9	3.8	1.5	4.4
1971	100.0	24.8	21.8	16.5	13.0	9.2	6.1	3.3	1.2	4.0
1972	100.0	26.4	22.6	16.7	12.5	8.5	5.5	3.0	1.1	3.6
1973	100.0	28.2	23.2	16.3	11.9	7.9	5.0	2.8	1.2	3.4
1974	100.0	30.1	23.8	16.1	11.3	7.3	4.7	2.6	1.1	3.0
1975	100.0	31.6	24.2	16.0	10.8	6.9	4.4	2.4	1.0	2.7
1976	100.0	33.2	24.5	15.7	10.3	6.4	3.9	2.2	0.9	2.9
1977	100.0	34.4	24.6	15.3	10.0	6.1	3.8	2.2	0.8	2.8

[1] Includes all other races not shown separately.

NOTE: In 1970 and 1971, month of pregnancy prenatal care began was reported by 39 States and the District of Columbia; in 1972, by 40 States and the District of Columbia; in 1973-75, by 42 States and the District of Columbia; in 1976 and 1977, by 44 States and the District of Columbia. Figures for 1970 and 1971 are based on a 50-percent sample of births; for 1972-76, they are based on 100 percent of births in selected States and on a 50-percent sample of births in all other States. Percents are based only on records for which month of pregnancy prenatal care began is stated.

SOURCE: National Center for Health Statistics: Vital Statistics of the United States, Vol. 1, for data years 1970-1975, Washington. U.S. Government Printing Office; for data years 1976-1977, Public Health Service, DHEW, Hyattsville, Md. To be published.

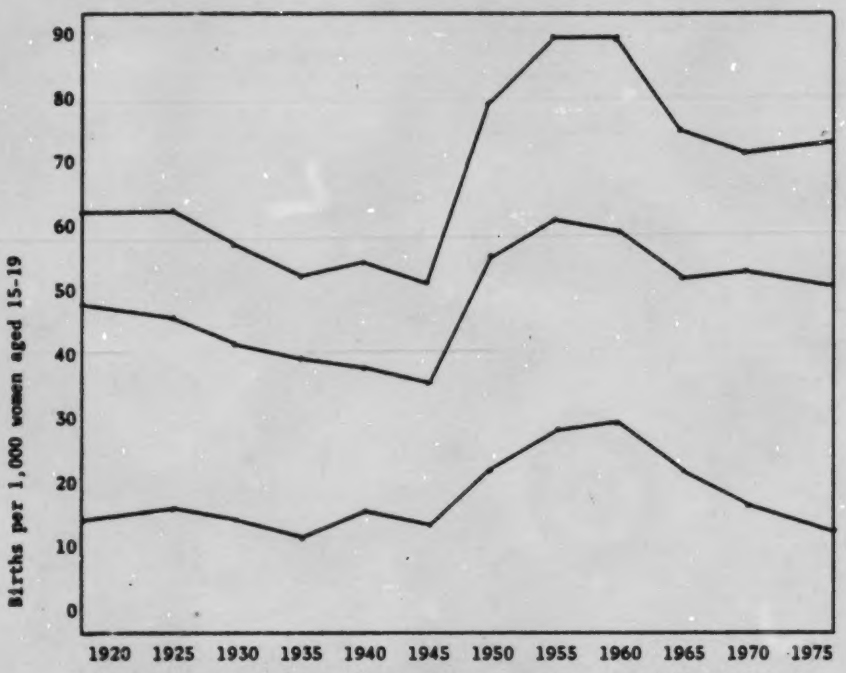
This graph reproduced from: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy) Table 20, p. 162.

handicaps affecting the child, and problems such as difficult labor and toxemia affecting the mother).

In addition to biomedical risk factors, adolescent pregnancy often is associated with low levels of income, education, and employment status, which may limit the opportunities for the child to develop optimally.

Domestic Violence. Data on crime statistics reflect, in part, the physical and mental health status of families. Many crimes are committed by persons known to the victim, and, in many cases, the perpetrator is a parent or a spouse. Parent-to-child, spouse-to-spouse, child-to-child, and child-to-parent violence are referred to collectively as "family violence." Much of the research and conceptualization of the problem has occurred only in the past few years. Although estimates of the incidence of family violence vary, Gelles

Exhibit 5.22 Fertility Rates of U. S. Women Aged 15-19: 1920-1974



SOURCES: National Center for Health Statistics. Fertility Tables for Birth Cohorts by Color: United States, 1917-1973 (U. S. Government Printing Office, 1976) Table 3A, advance 1974 data supplied by Robert L. Heuser, Chief, Natality Statistics Branch, Division of Vital Statistics, National Center for Health Statistics.
This graph reproduced from: Population Reference Bureau, Inc. Adolescent pregnancy and childbearing--Growing concerns for Americans. Population Bulletin, May 1977, 31(2).

and Straus (1979) provided a review of the literature and presented estimates based on their own research. They reported, for example, that 3.6% of children are at risk of serious injury from parents who kick, bite, punch, beat, threaten with a gun or knife, or use a gun or knife. They estimated that this could imply between 1.4 and 1.9 million children who were vulnerable to serious injury during the 1-year period covered by their study. Moreover, Gelles and Straus argued that these data may be underestimates of actual incidence, because of problems in underreporting. Their study relied, for example, on parental reports and ignored violence to children under 3 years old.

Gelles and Straus also reported that 16% of the couples interviewed indicated a violent act toward their spouse. Considering only the forms of violence most likely to produce physical injury, they estimated that 1.8 million (3.8%) of wives and nearly 2 million (4.6%) of husbands were physically abused during the year covered by the study. There is, of course, uncertainty in such estimates, and they may reflect attempts rather than frequency of harmful outcome.

Exhibit 5.23 Selected measures of teenage fertility, according to age and race: United States, 1968-77

(Data are based on the national vital registration system)

Race and year	Age									
	10-14 years	15-17 years	18-19 years	10-14 years	15-17 years	18-19 years	15-17 years	18-19 years	15-17 years	18-19 years
Total[1]	Live births per 1,000 women			Percent of all live births			Live births to unmarried women per 1,000 unmarried women		Live births to unmarried women per 1,000 total live births	
1968	1.0	35.1	113.5	0.3	5.5	11.4	14.7	30.0	403.7	201.3
1969	1.0	35.7	112.4	0.3	5.6	11.2	15.2	31.5	412.8	210.7
1970	1.2	38.8	114.7	0.3	6.0	11.3	17.1	32.9	429.8	223.9
1971	1.1	38.3	105.4	0.3	6.4	11.3	17.6	31.7	445.4	231.0
1972	1.2	39.2	97.3	0.4	7.3	11.7	18.6	31.0	458.5	246.1
1973	1.3	38.9	91.8	0.4	7.6	11.7	18.9	30.6	466.9	235.7
1974	1.2	37.7	89.3	0.4	7.4	11.4	19.0	31.4	482.5	238.6
1975	1.3	36.6	85.7	0.4	7.2	11.3	19.5	32.8	513.9	298.1
1976	1.2	34.6	81.3	0.4	6.8	10.8	19.3	32.5	540.2	314.1
1977	1.2	34.5	81.9	0.3	6.4	10.4	20.1	33.0	563.5	343.7
White										
1968	0.4	25.6	100.5	0.1	4.2	10.5	6.2	16.8	234.4	127.4
1969	0.4	26.4	99.2	0.1	4.3	10.2	6.6	17.0	240.3	129.0
1970	0.5	29.2	101.5	0.1	4.6	10.4	7.5	17.6	252.8	135.0
1971	0.5	28.6	92.4	0.1	4.9	10.4	7.4	15.9	251.7	131.7
1972	0.5	29.4	84.5	0.2	5.7	10.7	8.7	15.1	264.4	136.7
1973	0.6	29.5	79.6	0.2	6.0	10.6	8.5	15.0	276.4	142.6
1974	0.6	29.0	77.7	0.2	5.9	10.4	8.9	15.4	294.2	150.1
1975	0.6	28.3	74.4	0.2	5.8	10.3	9.7	16.6	329.6	171.9
1976	0.6	26.7	70.7	0.2	5.4	9.9	9.9	17.0	337.4	187.9
1977	0.6	26.5	71.1	0.2	5.1	9.4	10.7	18.8	389.2	209.5
Black										
1968	4.7	98.2	206.1	1.2	13.1	16.6	—	—	—	—
1969	4.8	96.9	202.5	1.2	13.1	16.7	72.3	129.1	720.9	482.9
1970	5.2	101.4	204.9	1.3	13.4	16.6	77.9	136.4	759.6	521.4
1971	5.1	99.7	193.8	1.3	14.0	16.4	80.9	136.3	796.3	560.3
1972	5.1	99.9	181.7	1.4	15.5	17.0	82.9	129.8	810.1	590.2
1973	5.4	96.8	169.3	1.5	15.8	17.1	81.9	123.0	825.6	603.8
1974	5.0	91.0	161.0	1.4	15.4	17.1	79.4	124.9	848.0	638.3
1975	5.1	88.6	156.0	1.4	14.6	16.8	77.7	126.8	874.0	676.8
1976	4.7	81.5	146.8	1.3	13.9	16.0	74.6	121.6	897.4	709.8
1977	4.7	81.2	147.6	1.2	13.1	15.4	74.3	125.9	904.7	746.4

[1] Includes all other races not shown separately.

NOTE: Beginning in 1970, births to nonresidents of the United States are excluded.

SOURCE: Division of Vital Statistics, National Center for Health Statistics: Selected data.

This graph reproduced from: U. S. Department of Health, Education, and Welfare. Health: United States, 1979. (Prepublication copy) Table 4, p. 130.

Other data suggest that domestic violence is related to socioeconomic factors, such as unemployment, and that at least some forms may tend to be transmitted intergenerationally within families.

Health Goals

Major shifts in emphasis have occurred in regard to health problems, at least in the United States. The concern used to be more about undernourishment rather than diet

control, and now there is an increased interest in prevention rather than treatment of health problems.

Poor nutritional habits were discussed in "Dietary Goals for the United States," which was prepared by the staff of the Senate Select Committee on Nutrition and Human Needs headed by Senator McGovern. Their data suggest a general, long-term deterioration in the quality of the U.S. diet. Drawing on other data, they relate diet to a variety of health problems, including infant mortality, congenital birth defect, and low intelligence quotient (IQ).

The report entitled "Healthy People: The Surgeon General's Report on Health Promotion and Disease Prevention" (Office of the Assistant Secretary for Health and Surgeon General, 1979) also stressed prevention. That report set forth five national goals that concentrate on improving the health of infants, children, adolescents, adults, and older adults and on reducing death rates:

- To continue to improve infant health, and, by 1990, to reduce infant mortality by at least 35% to fewer than 9 deaths per 1,000 live births.

  Cited were data indicating that black infants have almost the same death rate as white infants had 25 years ago (24 per 1,000 live births in 1977). Threats to survival and health are low birthweight and congenital disorders including birth defects.
- To improve child health, foster optimal childhood development, and, by 1990, reduce deaths among children, ages 1 to 14 years, by at least 20% to fewer than 34 per 100,000.

  The death rate in the U.S. is higher than those in some countries; and black children in the U.S. have a 30% higher mortality rate than white children.
- To improve the health and health habits of adolescents and young adults, and, by 1990, to reduce deaths among people, ages 15 to 24, by at least 20% to fewer than 93 per 100,000.

  Young adults, ages 15 to 24, have a higher death rate than 20 years ago. Three-fourths of the deaths are from accidents, homicides, and suicides.
- To improve the health of adults, and, by 1990, to reduce deaths among people, ages 25 to 64, by at least 25% to fewer than 400 per 100,000.

  More than one-third of all deaths have been caused by heart disease and stroke, while, at the same time, most of the drop in mortality rate has been from these same causes. The downward trend should continue with high blood pressure screening, correct diet, reduced smoking, and more exercise.
- To improve the health and quality of life for older adults, and, by 1990, to reduce the average annual number of days of restricted activity caused by acute and chronic conditions by 20% to fewer than 30 days per year for people, ages 65 and older.

The report argued that preventive health services can do much to preserve health and reduce death, disability, and disease. It emphasized four priority services related to families. These are family planning, pregnancy and infant care, immunizations, and sexually transmissible disease services.

Family planning services should reduce abortion and unwanted, unplanned pregnancies, but many are not used to their potential, possibly since teenagers and adults are unaware of their existence. Some carefully designed services with effective outreach have reduced the number of repeat pregnancies in teenagers, which often is a serious problem, but primary prevention also must become more effective.

Quality prenatal care and infant care are extremely important in reducing infant mortality. The Maternity and Infant Care (MIC) Projects appear to be responsible for declining rates in low birthweight incidence and infant mortality in vulnerable populations, such as the MIC Project for low income pregnant women in Birmingham, Alabama. Infant deaths decreased there by 47% from 1965 to 1977.

Immunizations virtually have eliminated serious diseases, but a current laxness in receiving immunizations has caused some diseases to increase. In 1976, more than a third of the children under age 15 were not adequately protected. The following year, rubella cases increased 65%; measles cases increased by 39%; whooping cough cases, by 115%. Public interest in immunizations must be maintained by public and private sectors. Some schools are helping by requiring proof of immunizations before accepting a child into the educational system.

Sexually transmitted diseases have been implicated in a variety of birth-related problems. For instance, in cases of genital herpes, severe neurological damage may result in about 50% of the infants delivered by infected mothers.

Programs Affecting Families

Clearly, an extremely wide range of programs, or policies, potentially impact upon families. The concern of the following discussion, therefore, will be on those programs that have the most *direct* impacts. The discussion will begin with a few of the better known family-related programs, and then end with a general discussion based on the work of A. Sidney Johnson III and the Family Impact Seminar.

Income Security Programs

Income security programs comprise one of the largest and most rapidly growing components of the Federal budget. Projections for 1981 indicate that income security will comprise 35% of the total outlay, as compared with 14% of total outlays 25 years ago. Eligible recipients include most persons who are aged, poor, disabled, or unemployed for other reasons.

Of most relevance at present is the program of aid to families with dependent children (AFDC), under Title IV-A of the Social Security Act. AFDC assists states and localities by grants to be used in providing cash assistance (welfare payments) to the needy. There is significant disparity across states in the administration of the program and the amount of payment made. Moderate increases are expected overall in both the number of recipients and the average payment. Projected outlays in 1981 are $7.4 billion, as

compared with $6.6 billion in 1979. In addition, eligibility for AFDC payments often means that the family is eligible for other services or programmatic benefits.

The Medicaid Program

Title XIX of the Social Security Act provides for medical assistance, targeted on low income families and individuals. Eligible persons are usually those qualified under one of the other welfare programs under the Social Security Act, including AFDC (Title IV-A), and the Supplemental Security Income (SSI) Program (Title XVI) for the aged, blind, or disabled. Low income is only one criterion for eligibility; financial resources also are examined to determine whether services may be obtained without assistance. In addition, "medically needy" persons who cannot pay – though who are not welfare recipients – also may be eligible for assistance through Medicaid.

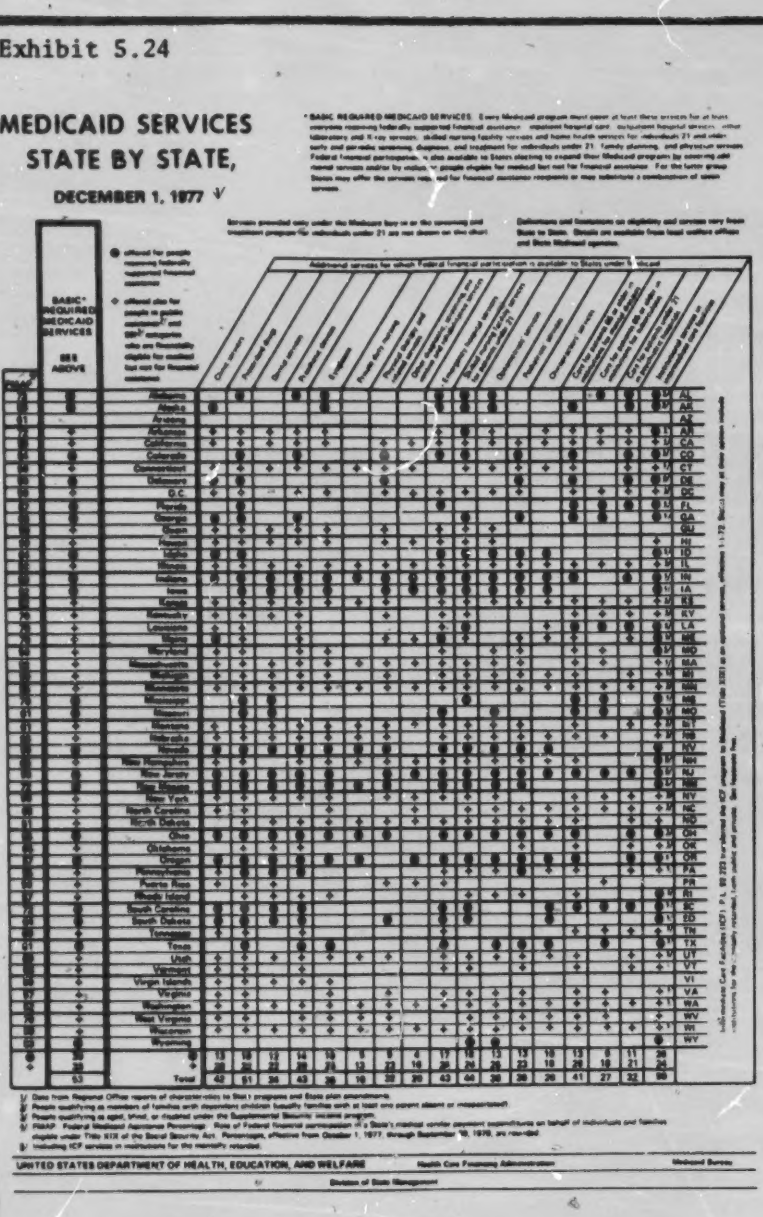
Administration of the Medicaid Program varies from state to state. Of particular concern for the purpose of this chapter are the "basic, required" services that include early and periodic screening, diagnosis, and treatment (EPSDT) and family planning services. These (and a few additional services) are required of all states. In addition, states may elect to provide a range of other services, which may impact on families less directly. These are shown in Exhibit 5.24, according to the states that provide them. (Note that EPSDT and family planning services are required of all states but are not shown in Exhibit 5.24. Note that all states except Alaska have Medicaid, and that the District of Columbia, Guam, Puerto Rico, and the Virgin Islands are providing Medicaid services.)

The Work Incentive Program

The Work Incentive Program (WIN) is intended to help recipients of AFDC funds to leave the welfare roles and obtain employment. WIN is required to provide services to families that are supportive of employment attainment. Most AFDC recipients are required to enroll in WIN, and some may obtain special services preparing them for work force entry.

Because the home responsibilities of many of the AFDC recipients prevent them from working, day care is the most commonly utilized service. The other two leading services are home management and family planning services, reflecting the fact that the recipients of AFDC are typically women, many of whom have young children. In 1977, the numbers of WIN registrants receiving services in these three categories were 81,675 (day care), 30,587 (family planning), and 21,918 (home management). Smaller numbers of registrants received other services offered through WIN.

Exhibit 5.24



MEDICAID SERVICES
STATE BY STATE,
DECEMBER 1, 1977 V

Total 42 51 35 43 36 10 38 39 43 44 38 36 26 41 27 32 98

UNITED STATES DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

SOURCE: Health Care Financing Administration. Data on the Medicaid Program: Eligibility/services/expenditures 1979 edition (revised). Table 1, p. 6.

Social Service Programs

The prominent Federal role in provision of social services is through Title XX. All 50 states and the District of Columbia have Title XX programs. Programs vary widely from state to state, based on their respective needs assessments. Like WIN, emphasis is placed on employment of welfare recipients through provision of day care services for children. In addition, states must offer family planning services to AFDC recipients.

Comprehensive Annual Service Program (CASP) plans prepared by the states represent their assessment of needs, based, in part, on citizen inputs about priorities. Plans vary widely by state, as shown in Exhibit 5.25. One of the mandated service goals of Title XX is protection of children and vulnerable adults from abuse, neglect, or exploitation, and the strengthening of family life. Thus, all 50 states and the District of Columbia proposed in fiscal year 1979 CASP plans to provide protective and emergency shelter services. The District of Columbia and 49 states plan to provide family counseling, another service category likely to impact directly on families.

Overview of Programs

An overall view of programs impacting families was provided by the Family Impact Seminar directed by A. Sidney Johnson, III. One task of the Seminar was to catalog those programs that have a potential impact on the family, singling out those that have an "explicit" impact on the family. Their report was released early in 1978 and is based on the 1976 Catalog of Federal Domestic Assistance. Although details have changed (there is, for example, a new Department of Education) and will not be considered here, the overall pattern is illustrative since many of the major programs are still in existence. The results of the Seminar's tabulation, on an agency-by-agency basis, are shown in Exhibit 5.26. Note that the Department of Health, Education, and Welfare (DHEW) had 119 out of a total of 258 programs with potential direct impact on families. Although DHEW had fewer than half the total number of programs, those programs DHEW did have contributed almost two-thirds of the total obligations.

An essentially similar pattern is shown when one considers only those programs explicitly intended to have a family impact. About one-third of the programs are DHEW, but DHEW programs account for about half the total obligations. Thus, although DHEW program obligations tend to be greater than those for other agencies on the average, a very significant proportion of total programmatic impact on the family is non-DHEW. (How much of these obligations, both DHEW and non-DHEW, represent actual expenditures is not clear, however, from the report.)

A different perspective on the allocation of Federal programmatic support is provided by Exhibit 5.27. The large total dollar obligation within Social Security is apparent from Exhibit 5.27. It also is clear that a large percentage of the programs involved are targeted on the aged population. "Welfare" – at the time of the report, largely within Social and Rehabilitation Services but since shifted to the Social Security Adminis-

Exhibit 5.25

SUMMARY OF SERVICES TO CHILDREN AND YOUTH AVAILABLE IN THE STATES, FY 79 TITLE XX - Final CASE Plans	PROTECTIVE SERVICES AND EMERGENCY SHELTER CARE	FOSTER FAMILY CARE	SPECIAL SERVICES IN FOSTER CARE	GROUP HOME CARE	INSTITUTIONAL CARE	THERAPEUTIC RESIDENTIAL CARE	INTERSTATE/ INTERJURISDICT PLACEMENT	ADOPTION	SUBSIDIZED ADOPTION	DAY TREATMENT	YOUTH SERVICES	SERVICES TO EXPECTANT PARENTS	EPSDT REFERRAL	CAMPING	RECREATION	FAMILY COUNSELING
Alabama	X				X					X			X			X
Alaska	X	X				X		X			X	X				
Arizona	X	X	X	X	X	X				X	X			X	X	X
Arkansas	X	X	X	X	X	X		X		X	X	X		X	X	X
California	X	X	X		X	X				X	X				X	X
Colorado	X	X	X	X	X	X	X	X	X		X	X	X			X
Connecticut	X	X	X	X	X	X		X	X	X	X	X		X	X	X
Delaware	X	X		X				X		X	X	X				X
District of Columbia	X	X			X			X	X		X	X	X			X
Florida	X	X	X	X	X	X					X					X
Georgia	X	X	X	X	X		X	X		X	X	X	X			X
Hawaii	X	X	X	X	X	X				X	X	X	X			X
Idaho	X	X	X	X	X	X		X	X		X	X				X
Illinois	X	X	X		X	X		X		X	X	X		X		X
Indiana	X	X		X		X		X		X	X			X	X	X
Iowa	X	X		X	X	X	X	X	X		X					X
Kansas	X					X					X		X		X	X
Kentucky	X	X	X	X	X	X	X	X	X	X	X	X			X	X
Louisiana	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Maine	X	X	X	X	X	X		X		X	X	X		X	X	X
Maryland	X	X	X	X	X	X		X		X	X	X		X	X	X
Massachusetts	X	X	X	X	X	X		X		X	X	X		X	X	X
Michigan	X	X		X				X			X					X
Minnesota	X	X		X		X	X	X		X	X			X	X	X
Mississippi	X	X	X	X	X	X		X		X	X	X	X	X	X	X
Missouri	X				X			X			X			X	X	X
Montana	X	X		X	X	X		X		X	X	X	X			X
Nebraska	X	X			X			X		X	X					X
Nevada	X	X	X		X			X			X		X			X
New Hampshire	X	X			X	X	X	X			X			X	X	X
New Jersey	X	X			X	X	X	X		X	X				X	X
New Mexico	X	X		X	X	X	X	X	X	X	X	X	X		X	X
New York	X	X	X	X	X	X		X		X	X	X			X	X
North Carolina	X	X	X		X	X	X	X		X	X	X	X	X	X	X
North Dakota	X	X	X	X		X	X	X			X	X			X	X
Ohio	X	X	X	X	X	X	X	X	X	X	X			X	X	X
Oklahoma	X	X		X	X	X	X	X			X	X	X	X	X	X
Oregon	X	X	X	X	X	X	X	X			X	X		X		X
Pennsylvania	X				X	X					X			X	X	X
Rhode Island	X	X		X	X	X	X	X			X	X	X			X
South Carolina	X	X		X	X	X		X	X	X	X	X		X	X	X
South Dakota	X	X	X	X	X	X				X		X			X	X
Tennessee	X	X	X		X	X	X	X	X		X	X				X
Texas	X	X		X	X	X		X		X	X	X	X	X	X	X
Utah	X	X		X	X	X		X			X	X	X	X	X	X
Vermont	X	X	X	X		X		X			X					X
Virginia	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X
Washington	X	X		X	X	X	X	X	X	X	X	X	X			X
West Virginia	X	X	X	X	X	X		X	X		X	X	X	X		X
Wisconsin	X	X		X	X	X		X		X	X		X	X	X	X
Wyoming	X	X						X			X					X
TOTAL	51 States	49 States	30 States	48 States	47 States	47 States	16 States	46 States	13 States	30 States	50 States	34 States	22 States	24 States	30 States	50 States

Source: Kilgore, G., & Salmon, G. Summaries and characteristics of states' Title XX social services plans for fiscal year 1979. Technical Notes, June 15, 1979. Pp. 214-215.

Exhibit 5.26 Inventory of Programs with Potential Direct Impact on Families

Agencies	Potential Family Impact No. of Programs	Total Obligations ($ Million)	Explicit Family Impact No. of Programs	Total Obligations ($ Million)
DHEW:				
Education	59	5,881	2	75
Welfare	25	18,336	9	15,568
Health	25	1,387	6	348
Social Security	8	93,473	2	17,761
Office of the Secretary	2	151	1	124
Total	119	119,228	20	33,876
VETERANS (VA)	31	28,385	7	11,331
HOUSING & URBAN DEVELOPMENT (HUD)	24	8,440	19	8,410
LABOR (DOL)	21	6,695	4	485
AGRICULTURE (USDA)	19	12,191	9	7,005
INTERIOR/Bureau of Indian Affairs	14	350	2	10
JUSTICE	13	697	-	-
ACTION	9	81	-	-
CIVIL SERVICE COMMISSION	5	85	-	-
COMMUNITY SERVICES ADMINISTRATION	4	401	1	28
APPALACHIAN REGIONAL COMMISSION	3	91	-	-
RAILROAD RETIREMENT BOARD	1	3,639	1	3,639
TREASURY	1	124	-	-
TRANSPORTATION	1	116	-	-
NATIONAL LABOR RELATIONS BOARD	1	68	-	-
COMMISSION ON CIVIL RIGHTS	1	8	-	-
PRESIDENT'S COMMITTEE ON EMPLOYMENT OF THE HANDICAPPED	1	1	-	-
TOTAL	268	180,600	63	66,794

SOURCE: George Washington University, Institute for Educational Leadership. Toward and inventory of federal programs with direct impact on families. Family Impact Seminar Staff Report, February 1978. Summary of Table I, p. 17.

tration – also had obligations in regard to families. Other agencies with large obligations targeted on families included the Veterans Administration, Housing and Urban Development, and the Department of Agriculture.

Summary

At the beginning of this chapter, it was mentioned that statistics about the "average" family were becoming increasingly misleading. Nevertheless, many of the data referred to in this chapter suggest that the general trend of convergence among racial and ethnic groups has continued through the 1970s (though perhaps somewhat slowed since the 1960s). On the surface, that would suggest that data about the "average" family would be more, not less, useful. Gains, however, have not been uniform.

Exhibit 5.27 Inventory by Target Group

SOURCE: George Washington University, Institute for Educational Leadership. Toward an inventory of federal programs with direct impact on families. Family Impact Seminar Staff Report, February 1978. Table II.

Legend: 324(10) - $324 million
10 programs

Agencies	CHILD	CHILD/YOUTH	YOUTH	YOUTH/ADULT	ADULT	AGED	DIVERSE	FAMILY	TOTAL
DHEW:									
Education	144(5)	2,634(28)	873(5)	2,061(13)	3(1)	--	91(5)	75(2)	5,881(59)
Welfare	72(2)	--	7(1)	--	--	131(3)	2,558(10)	15,568(9)	18,336(25)
Health	108(3)	--	--	--	--	--	931(16)	348(6)	1,387(25)
Social Security	--	--	--	--	--	62,085(3)	13,627(3)	17,761(2)	93,473(8)
Office of the Secretary	--	--	--	--	--	--	27(1)	124(1)	151(2)
Total	324(10)	2,634(28)	880(6)	2,061(13)	3(1)	62,216(6)	17,234(35)	33,876(20)	119,228(119)
VETERANS	--	--	--	5,664(1)	11,314(22)	--	76(1)	11,331(7)	28,385(31)
HOUSING & URBAN DEVELOPMENT (HUD)	--	--	--	--	--	6(1)	12(4)	8,422(19)	8,440(24)
LABOR (DOL)	--	--	142(1)	5,151(4)	654(5)	30(1)	233(6)	485(4)	6,695(21)
AGRICULTURE (USDA)	1,780(3)	--	--	--	--	--	1,408(7)	9,003(9)	12,191(19)
INTERIOR/Bureau of Indian Affairs	183(5)	--	33(1)	--	3(1)	--	121(5)	10(2)	350(14)
JUSTICE	--	--	48(4)	--	--	--	649(9)	--	697(13)
ACTION	--	--	N/A(2)	--	--	51(3)	30(4)	--	81(9)
CIVIL SERVICE COMMISSION	--	--	84(2)	N/A(1)	--	--	1(2)	--	85(5)
COMMUNITY SERVICES ADMINISTRATION	17(1)	--	--	--	--	--	356(2)	28(1)	401(4)
APPALACHIAN REGIONAL COMMISSION	20(1)	--	--	--	--	--	71(2)	--	91(3)
RAILROAD RETIREMENT BOARD	--	--	--	--	--	--	--	3,639(1)	3,639(1)
TREASURY	--	--	--	--	--	--	124(1)	--	124(1)
TRANSPORTATION	--	--	--	--	--	--	116(1)	--	116(1)
NATIONAL LABOR RELATIONS BOARD	--	--	--	--	--	--	68(1)	--	68(1)
COMMISSION ON CIVIL RIGHTS	--	--	--	--	--	--	8(1)	--	8(1)
PRESIDENT'S COMMITTEE ON EMPLOYMENT OF THE HANDICAPPED	--	--	--	--	--	--	1(1)	--	1(1)
TOTAL	2,324(20)	2,614(28)	1,187(16)	12,876(19)	11,974(29)	62,303(11)	20,508(82)	66,794(63)	180,600(268)

For instance, although conditions for families generally have been improving, overall data for black families show that essentially the status quo is being maintained. Furthermore, although conditions among many black families have improved, the greater proportion of female-headed families now as compared with 10 years ago has meant that overall there has been little improvement. The black female-headed family is becoming increasingly a poverty family over the same period when families in general are experiencing lower poverty rates.

Another trend is differentially affecting families. This trend is the emergence of the multiple wage-earner family or household, in which two or more persons have an income. In a husband-wife family, both may have an income; in female-headed families, the mother may be the only possible wage earner – and she may be unemployed or underemployed. This trend is tending to depress the gains of black female-headed families compared with other families. Gains for women, in general, have not been sufficient to bring female-headed families up to income levels of male-headed households. There are more working women but, to a large degree, two or more incomes are becoming necessary to maintain a given standard of living.

To the extent that low socioeconomic status – for whatever reasons – is associated with problems of developmental risk, children in female-headed families may experience an increasing level of risk compared with children in other families. This may be exacerbated by the prospects of cutbacks in certain social service programs during periods of Federal fiscal austerity and balanced budgets. It is extremely difficult accurately and validly to assess needs of any one population compared with another, and it should be emphasized that socioeconomic, ethnic, and other essentially demographic statistics generally are poor as measures of developmental problems, and that more direct measures are needed.

The 1980s should not be a period in which improvements in the "average" condition of the family are used to justify broad cutbacks in programs that benefit families. Needs vary widely across families. And when there may be a shortfall in income supports, health, or other services, it is important to ensure that the needs of all families are balanced properly against other demands. It is also important to ensure that programs are targeted on those families – irrespective of demographic characteristics – whose needs are greatest. The 1980s should be a period, therefore, in which efforts are increased to develop measures of need among families, to examine programs comprehensibly, to make hard judgments about how programmatic resources should be targeted, and to determine how those dollars may be justified compared with competing uses.

Kurt J. Snapper is President, Decision Science Consortium, Inc., Falls Church, Virginia.

BIBLIOGRAPHY

Carter, H., & Glick, P.C. *Marriage and divorce: A social and economic study* (Revised ed.). Cambridge, Massachusetts: Harvard University Press, 1976.

Farley, R., & Bianchi, S. Demographic aspects of family structure among blacks: A look at data a decade after the Moynihan Report. Paper presented at the Annual Meeting of the American Sociological Association, Chicago, September 5, 1977.

Gelles, R.J., & Straus, M.A. Violence in the American family. *Journal of Social Issues,* 1979, 35(2), 15-39.

George Washington University, Institute for Educational Leadership. *Toward an inventory of federal programs with direct impact on families.* Family Impact Seminar Staff Report, February 1978.

Glick, P.C., & Norton, A. Marrying, divorcing, and living together in the U.S. today. *Population Bulletin,* February 1979, 32(5).

Johnson, B.L. *Changes in marital and family characteristics of workers, 1970-78.* Special Labor Force Reports – Summaries. Washington, D.C.: Office of Current Employment Analysis, Bureau of Labor Statistics, U.S. Department of Labor, April 1979.

Kilgore, G., & Salmon, G. Summaries and characteristics of states' Title XX social services plans for fiscal year 1979. *Technical Notes,* June 15, 1979. (U.S. Department of Health, Education, and Welfare; Office of the Assistant Secretary for Planning and Evaluation).

Population Reference Bureau, Inc. Adolescent pregnancy and childbearing: Growing concerns for Americans. *Population Bulletin,* May 1977, 31(2).

Ross, H.L., & Sawhill, I.B. *Time of transition: The growth of families headed by women.* Washington, D.C.: The Urban Institute, 1975.

U.S. Bureau of the Census. Census Bureau conference on issues in federal statistical needs relating to women. *Current Population Reports,* 1978, Series P-23, No. 83.

_____. Perspectives on American fertility. *Current Population Reports,* Special Studies, 1978, Series P-23, No. 70.

_____. Consumer income: Characteristics of the population below the poverty level: 1977. *Current Population Reports,* March 1979, Series P-60, No. 119.

_____. Population characteristics: Households and families by type: March 1979 (Advance Report). *Current Population Reports,* October 1979, Series P-20, No. 345.

_____. Consumer income: Money income and poverty status of families and persons in the United States: 1978 (Advance Report). *Current Population Reports,* November 1979, Series P-60, No. 120.

U.S. Department of Health, Education, and Welfare. *Health: United States 1979.* Washington, D.C.: Public Health Service. DHEW Publication No. (PHS) 80-1232, 1979.

_____. *Data on the Medicaid Program: Eligibility/services/expenditures* (1979 ed. revised). Baltimore, Maryland: Health Care Financing Administration, 1979.

U.S. Department of Labor. *Women in the labor force: Some new data series.* Report 575. Washington, D.C.: Bureau of Labor Statistics, 1979.

_____. Multi-earner families increase. *U.S. Department of Labor News,* October 31, 1979. (Office of Information)

CHAPTER 6

STATUS OF RESEARCH ON CHILDREN

Edward Zigler and Victoria Seitz

The study of human development is inevitably double-edged. On the one side, there is the scientific, scholarly component. The change from the tiny, prelinguistic, physically clumsy infant to the large, verbal, gracefully coordinated adult is one of the most challenging phenomena a scientist can explore. For the past half century, researchers have been responding to this challenge, studying the basic events in development – perception, cognition, learning, physical growth, socialization – and research in these areas is flourishing as never before. Much of this research could be labeled "basic" research, as it is motivated broadly by the desire to expand human knowledge about ourselves and our environment.

But the study of development has another, "applied" aspect, as it can often be undertaken in order to help meet a society's perceived needs. Just as physiology and anatomy are the basic sciences for medicine, developmental psychology is the basic science for childrearing and for social policy planning in areas related to children and families. In principle, one purpose of the scientific study of human development must always be to have practical application. Because the subject matter is children, rather than rocks, stars, or fishes, the potential applicability to society's problems of any facts discovered by developmental psychologists is almost inevitable.

One of the most important developments in recent research relating to children has been an increased recognition that there is no real gap between basic and applied approaches (Zigler, in press). In this review, it will be evident that much current research – on issues such as day care, child abuse, mainstreaming, and the effects of schooling – reveals a synergistic interplay between the worlds of the ivory tower and the real settings in which children spend their lives. As will be seen, the presumed chasm between basic and applied research has been bridged many times, and we believe that researchers will and must bridge it with increasing frequency. Society will benefit the most from social science when it represents a dialectic between basic and applied research, or, as one commentator has so aptly put it, when it is "in a state of creative tension – between the pursuit of answers to contemporary social questions and the quest for firm scientific principles" (Weisz, 1978, p. 1). In this paper we will examine first several trends that have characterized recent research relating to children. Then we shall examine research in several key areas.

Changing Trends in Research on Children

Recent research on children shows evidence of three clear trends. One such trend is an increasing emphasis on *biological determinants* of development. A second is an increasing emphasis on the concept of *interaction* within families. Finally, there is increasing

concern with the larger *context* within which families must function. We discuss each of these trends below.

Biological Influences on Development

With only occasional exceptions, such as the maturational approach of Gesell and his colleagues (Gesell, 1937; Gesell & Ilg, 1943), American psychology historically has been characterized by a strong commitment to environmentalism. This commitment reached a peak in the 1960s with many psychologists believing that young children were so malleable that rather minimal interventions in their early years would have major, lasting impacts (Bloom, 1964; Hunt, 1961). The 1970s have witnessed a diminution of this environmentalist ardor and an increased interest in the importance of biological factors in development. One sign of this trend is in a re-emergence of a maturational approach in the cross-cultural work of Kagan and his colleagues (Kagan & Klein, 1973; Kagan, Klein, Finley, Rogoff, & Nolan, 1979), who argued that certain aspects of children's cognitive functioning may emerge regardless of environmental influences such as schooling.

The biologically-oriented approach of ethology is also having a widening impact on developmental theory. Ethological concepts such as imprinting and critical periods have importance for research on human social attachments (Ainsworth, 1979; Bowlby, 1969; Klaus, Jerauld, Kreger, McAlpine, Steffa, & Kennell, 1972) and on sex-role identity (Money, Hampson, & Hampson, 1957), and, in general, there is an increased interchange of theory and research methods between those who study animals and those who study humans. Researchers who have examined the social behavior of animals in their natural habitats, for example, have provided evidence of possible genetic bases for certain maternal and other social behaviors in humans (Fossey, 1971; Goodall, 1965). Human behavior has, in turn, begun to be used as a source of hypotheses about what to study in animals. Researchers are attempting to determine, for example, whether any primates other than humans display the sequence of sensorimotor cognitive stages that Piaget has described (Jolly, 1974). There is current interest as well in whether any nonhuman animals might show other cognitive abilities long believed to be exclusively human, such as linguistic ability and self-awareness. Language research with chimpanzees has aroused so much interest that the names of the highly tutored chimps – "Lana," "Sarah," and "Washoe" – have almost become household words.

The role of specifically genetic factors is also receiving increased attention. There has been an attempt by sociobiologists, for example, to incorporate most of human social behavior into a comprehensive explanatory framework based upon genetic factors (Wilson, 1975, 1978). Within psychology, the major impact has come from the field of behavior genetics, which has become an active area in the 1970s. Currently, research is being conducted on genetic factors in a wide variety of traits including alcoholism (Goodwin, Schulsinger, Hermanson, Guze, & Winokur, 1973), schizophrenia (for reviews see Gottesman & Shields, 1972; Heston, 1970; and Rosenthal & Kety, 1968), intelligence (Gottesman, 1963; Scarr & Weinberg, 1976), and stuttering (Kidd, 1977). Behavior-genetic research obviously has altered the emphasis on environmental factors prevalent 25 years ago. At that time, explanations for stuttering, for example, would have stressed psychodynamic factors such as the child's relationship with his mother.

While the behavior-genetic approach appears very promising, it has often been the subject of controversy. This has been the case particularly for behavior-genetic investigations of IQ test performance. A paper by Jensen titled "How much can we boost IQ and scholastic achievement?" (1969) ignited a storm of reaction that has persisted now for almost a decade. There are some psychologists who take the position that we should not study possible genetic factors for this trait at all (Kamin, 1974). It appears to us that such a reaction is too extreme. The discovery of genetic determinants of behavior does not rule out the importance of environmental determinants as well. Behavior geneticists have pointed out that with most traits one will find a "range of reaction" – a range of possible outcomes that may arise from a given genetic endowment depending upon the environments encountered. (See Hirsch, 1970, for a particularly thoughtful treatment of this controversial issue.)

As Anastasi (1958) has pointed out, the question of greatest interest in the nature-nurture issue is "how?": How does a genetic potential become translated into an actual physical or psychological characteristic through the organism's interaction with the environment? We have not yet answered Anastasi's question, but the fact that research on biological factors is becoming active is a promising step in the right direction.

Interaction within Families

Another important conceptual advance in the past few years has been the recognition that the family is more complex than the mother-child dyad. Researchers have, for example, discovered the father. The nature of his role in the family is now an active topic for investigation (Biller, 1971; Clarke-Stewart, 1978; Hoffman, 1971; Lamb, 1976; Lynn, 1974). In keeping with Bronfenbrenner's (1977) recommendations, a great deal remains to be done to explore the role of other family members, such as siblings and grandparents, in socialization. Variations of family structure, such as communes and the single-parent family, are also receiving much more attention (Hetherington, Cox, & Cox, 1976; Johnston & Deisher, 1973; Rabin, 1971). The present research focus much more adequately reflects the fact that children are reared within diverse family structures than did the earlier preoccupation with the mother-child relationship in the intact nuclear family.

Awareness of the complexity of the family has been accompanied by interest in the quality of interactions among family members and in the active role that children themselves may play in their own socialization. It is now considered a truism that if parents are to some degree molders of children, children are at least equally molders of parents. A number of researchers now have shown that caretakers are responsive to individual differences in infants, and, conversely, that the tactics employed by socializing agents have different results depending upon the nature of the child to whom they are applied (see Bell, 1971; Bell & Harper, 1977; Clarke-Stewart, 1979; Freedman, 1974; Lewis & Rosenblum, 1974). For example, some neonates are more physically energetic than average, and such babies rarely if ever become slow-moving, quiet children, no matter how motivated their parents are to change them (Thomas & Chess, 1977).

The shift from viewing children as passive to viewing them as active has had consequences for the kinds of behaviors that are investigated. Research based on the passive

infant view assumed a unidirectional influence in parent-child relationships, with the parent controlling what the child experienced. Psychologists focused on caretaking practices, such as how children were fed, or talked to, or disciplined, and tried to determine the effects of such practices on children. The active child point of view has generated a different kind of research focusing on how infants influence parents, and especially how stable patterns of interaction become established (Bell, 1968; Brazelton, 1969; Clarke-Stewart, 1979; Freedman, 1974; Thomas & Chess, 1977). Two theoretical models that have been advanced to deal with these complex interactions are the "transactional" model of Sameroff and Chandler (1975) and the "canalization" model described by Scarr-Salapatek (1976).

The active-child view has also influenced opinions concerning the nature of effective parenting. Many theorists now suggest that the effective parent is not someone stamped from a mold, responding in the same way to all children, but rather is one who has empathic understanding of the idiosyncratic style of his or her child (Ainsworth, Bell, & Stayton, 1974; Baumrind, 1975; Blehar, Lieberman, & Ainsworth, 1977; Schaffer & Emerson, 1964; Thomas, Chess, & Birch, 1968). The concept that some children are inherently more difficult to rear than others, but that such children nevertheless can be socialized effectively, is another important contribution (Thomas & Chess, 1977). It is now widely accepted that the responsibility for the outcome of socialization rests neither on the parents nor on the child alone.

The Family in Context

For many years, the socialization of the child was viewed as a very lonely kind of interaction between parents and their children. The emerging view is that neither the developing child nor the family exists in isolation but rather that they are affected by virtually every institution in a society (Keniston & The Carnegie Council on Children, 1977). Children are influenced by the media, by the state of the economy, by the length of the work day, and by an industry's decision about whether its employees must move from city to city every few years. Children are influenced by the availability or unavailability of satisfactory day care arrangements. And they are affected by whether they live in high rise urban apartments an elevator's ride from the playground or in suburban housing with fenced back yards. The family is still seen as the primary agent of a child's socialization, but it is seen no longer as the sole agent. This recognition has changed greatly the nature of developmental research.

One manifestation of this trend is an increased interest in cross-cultural studies. The principal problem with such evidence is the fact that the data are usually correlational. It is difficult to determine the causal factors in cultural differences. Nevertheless, anthropological and cross-cultural data provide a window onto very different circumstances in how children and families exist elsewhere, and such data are valued particularly as providing "natural experiments" for examining the factors that influence development. In the study of the effects of cultural change, for example, the extreme case of one African tribe, the "Ik," has demonstrated that the external destruction of traditional societal practices can result in a total breakdown of family structure, a near abandonment of care

for children, and the disappearance of such basic human qualities as affection and concern for others (Turnbull, 1973). Other provocative insights have come from the more recent reports of childrearing and family support systems in China (Kessen, 1975).

Recent Research on Children: Some Key Issues of Current Interest

Having considered how research on children has been changing in recent years, we will now examine in greater detail several topics of active current research.

Child Abuse

Child abuse is one of the most visible and pressing problems confronting developmental psychologists today. (See Gerbner, Ross, & Zigler, in press, for a more complete overview of this complex research area.) It is also an issue in which the relationship between basic and applied research is very visible. Most people would agree that research seeking explanations for the development of inappropriate interactions between abusing parents and abused children has great social relevance. In contrast, most people would probably categorize studies on the behavior of infant monkeys toward terry-cloth-covered surrogate "mothers" as basic research having no obvious social application. Ainsworth, however, has been studying the anomalous development of attachment bonds in families in which abuse occurs (in press) and has found important connections between what occurs in these families and the results from Harlow's research with monkeys. Several particularly provocative findings are that infant rhesus monkeys will cling to surrogate mothers if they behave in a frightening manner by emitting air blasts (1961), and that the infant monkeys will even cling to their own mothers who physically abuse them (1963). These findings have important implications for detection and prevention of child abuse in that they support clinical evidence that abused children may still seek to be with abusive parents (Ainsworth, in press).

Harlow's basic studies have also contributed toward Ainsworth's theories that abuse occurs only where insecure attachment develops, that identifiable characteristics of the parent and/or of the child foster "anxious attachment," and that these anxiously attached parents and children harbor more frustrations and angers than do other parents and children. Ainsworth further suggested that instruments that could measure attachment of parents and children could be used to help identify families at risk of abuse, and that programs aimed at promoting secure parent-child bonds would probably help to alleviate the child abuse problem. While Ainsworth has drawn upon other researchers' results in addition to Harlow's (e.g., Bowlby, 1969, 1973; DeLozier, 1978; George & Main, in press), Harlow's particular contribution clearly illustrates how basic research can form a foundation for applied work.

Although there are few firm conclusions in the child abuse area, some tentative information does emerge. There is, for example, evidence that possessing certain charac-

teristics may make a child more prone to being abused (Alvy, 1975; Gelles, 1973; Gil, 1969; Hurt, 1975; Newberger, Reed, Daniel, Hyde, & Kotelchuck, 1975; Zimbardo & Ruch, 1975). The characteristics of abused children that have been investigated include age, gender, birth order, temperament, physical development, and congenital features.

One relationship found most repeatedly is that premature children experience a heightened incidence of child abuse (Caplan, Mason, & Kaplan, 1965; Hurt, 1975; Kaplan, Smith, Grobstein, & Fischman, 1973; Newberger & Hyde, 1975; Stern, 1973). Because the characteristics of abused children are often highly interrelated, however, the interpretation of findings is somewhat speculative. For example, there is a suggestion that children small for their age are more likely to be abused. But body size is sometimes related to prematurity. Another suggestive finding is that children with deviant congenital characteristics are more likely to be abused than are children without such defects (Gil, 1969; Milowe & Lourie, 1964). Congenital defects may be related not only to body size and prematurity, but also to mental retardation, another child characteristic found to be associated with child abuse (Hurt, 1975).

A considerable amount of work in the child abuse area has focused also on the psychodynamic and sociocultural characteristics of abusing parents (Alvy, 1975; Bronfenbrenner, 1974; Daniel & Hyde, 1975; Garbarino, 1976; Hurt, 1975; Newberger & Hyde, 1975; Newberger et al., 1975). At a psychodynamic and somewhat tentative level, it has been reported that abusing and neglectful parents have poor self-concepts or poor self-esteem (Daniel & Hyde, 1975). Alcoholism and drug usage also have been found to be associated with being an abusing parent (Newberger, 1973; Newberger & Hyde, 1975). While it is often presumed that children who are abused grow into abusing parents, there has been only minor support for this expectation in the research findings (e.g., Silver, Dublin, & Lourie, 1969). In one review, Gelles (1973) noted Gil's finding that 11% of abusing parents were abused as children. In Gil's (1969) survey data, this amounted to only 14% of abusing mothers and 7% of abusing fathers having been abused during childhood.

In terms of implications for effective intervention, one of the potentially most important research findings is that abusing parents often have unrealistic expectations about what behaviors their children are capable of and/or a general lack of knowledge concerning the development of children (Alvy, 1975; Daniel & Hyde, 1975; Elmer, 1967; Gelles, 1973; Hurt, 1975; Newberger & Hyde, 1975). They are, for example, more likely to interpret crying, soiling of diapers, or breaking a toy as a deliberate attempt to misbehave or to be spiteful and cause trouble. It thus appears that anything we can do to teach the general population about child care and the normal course of the development of children would be helpful in reducing the incidence of child abuse. We therefore endorse the suggestion of many workers that our nation commit itself to teaching parents how to be parents, with courses in parenthood becoming part of the curriculum of every high school in America. A model for such an effort is the Education for Parenthood Program mounted jointly by the Administration for Children, Youth, and Families and the Office of Education.

Day Care

The need for adequate day care increasingly is being brought to the attention of both scientists and the public (Fraiberg, 1977). This need is pressing. In the United States, more than half of all women with school-age children now work, and over 30% of women with children under 6 do so. These figures have risen markedly since 1952, when they were 35% and 16%, respectively (White House Conference on Children, 1970). While preschool children traditionally have been the recipients of alternative child care arrangements and the focus of research interest, there is increasing interest in infant day care, since there is proportionately an especially rapid rise in mothers of infants returning to work; and in school-age day care, since two-thirds of day care needs are now for school-age children. The sheer number of children involved is staggering. Nearly 2,000,000 school-age children are "latch-key children," who return home to an empty house each day (U.S. Department of Commerce, Bureau of the Census, 1970).

As with the child abuse issue, day care is an area in which the reciprocal nature of basic and applied research is evident. Much of the theoretical underpinning for research on day care has come and will continue to come from research on parent/child attachments (Ainsworth, 1979; Ainsworth & Bell, 1970, 1973; Blehar, 1974; Bowlby, 1969, 1973). Another important area of research is the investigation of peer group socialization (Bryan, 1975; Hartup, 1975, in press; Lewis & Rosenblum, 1975).

From the more applied approach, a valuable source of information has been the work of Israeli researchers who have studied children reared in the group-care arrangements of the Israeli kibbutzim. These researchers have examined, for example, relationships between kibbutz childrearing practices and kibbutz-reared children's later effectiveness as soldiers (Amir, 1969), their personality development (Kaffman, 1965; Nevo, in press), their sex role development (Rabin, 1970), and their moral attitudes (Rettig, 1966). This research is applied because it is motivated in part by the need to know whether the kibbutz is producing healthy, useful members of its society. This research, however, has also added to our basic knowledge of child development. The kibbutz studies are providing valuable information not only on the aforementioned topics, but on development of self-concept (Handel, 1961), of mental and motor faculties (Kohen-Raz, 1968), and of relationships with parents and peers (Devereux, Shouval, Bronfenbrenner, Rodgers, Kav-Venaki, Kiely, & Karson, 1974; Rabin & Goldman, 1966; Sharabany, 1974) under different childrearing systems.

While there are no simple conclusions yet to be drawn from the kibbutz studies (Beit-Hallahmi and Rabin [1977] provide an excellent review of this literature), it is evident that the effects of this rather extreme form of day care have not been catastrophic for the children or society. The kibbutz results also support the conclusion of American researchers that we must expect much greater complexity than finding simply that day care does or does not harm children.

There has been considerable American research on the effects of working mothers and/or substitute caretakers (e.g., Blehar, 1974; Etaugh, 1974; Fein & Clarke-Stewart, 1973; Fraiberg, 1977; Provence, Naylor, & Patterson, 1977; Rubenstein & Howes, 1979; Webb, 1977). While this research has yielded many valuable findings, however, it is still very incomplete. Much research on day care has examined only possible negative conse-

quences, such as damage to the parent-child attachment bonds, and only more recently has there been more interest in possible positive effects, such as increased cooperativeness and altruism, which might result from children's attending group day care centers (e.g., Rubenstein & Howes, 1979). Most research has also focused on high quality, expensive day care centers. Since only a small percentage of children who receive day care attend licensed day care centers, much more information is needed on the effects of other kinds of day care, such as care in the child's home by an adult other than the mother, or care in someone else's home.

The School as a Socializing Agent

It is widely recognized that the school is an important socializing agent, but research has focused often on cognitive rather than social effects of schooling. In recent years, this emphasis has begun to change. One issue that has been the focus of much recent research is school segregation. Placing children in homogeneous groups from their earliest days in school has implications for how they will adjust to a heterogeneous society. The Clarks' research in the 1940s and 1950s (Clark, 1955; Clark & Clark, 1947) showed the power of segregated schooling to overcome the efforts of even the most dedicated black families to make their children feel valued by society. The issue remains important with many unanswered questions. For example, while results of studies of school integration are not consistent, one disturbing trend is for black children's educational and occupational aspirations to be lower when they are in integrated rather than in segregated schools (St. John, 1975). For many reasons it has been difficult to study the effects of large and sudden social changes, such as desegregation and busing. (For reviews of research on effects of school desegregation and busing, see Armor, 1972; Coleman, Campbell, Hobson, McPartland, Mood, Weinfeld, & York, 1966; and St. John, 1975.) Researchers studying the effects of racial mix in schools or the effects of busing, therefore, generally have treated these as unitary phenomena. There are signs, however, that future research will address the psychological variables more directly, as in attempting to determine those conditions that lead to "high quality" desegregation (St. John, 1975).

In the broader sense, school integration should refer to mixture across many lines, not just ethnic or socioeconomic ones. Recent efforts to "mainstream" handicapped children into regular classrooms are an example. Although many states now have laws requiring that handicapped children be integrated with nonhandicapped children in the classroom, as yet we have little knowledge as to how this can be accomplished best or the consequences for the children. As has been the case in studies of preschool intervention programs, the danger exists that IQ or achievement scores alone may be taken as indicators of the success or failure of mainstreaming efforts. As for other intervention programs, we would argue that social competence should be the ultimate criterion for monitoring the effectiveness of mainstreaming (Zigler & Muenchow, in press). In academic areas, mainstreamed retarded children appear to do as well as children in special classes, although there is little evidence that mainstreaming is more effective (Gruen, Ottinger, & Ollendick, 1974). But the expectation that mainstreamed retarded children would be less stigmatized than children in special classes has not been borne out (Goodman, Gottlieb, &

Harrison, 1972; Gottlieb & Budoff, 1973). Clearly, more research is needed to determine which children, and which handicaps, are most likely to benefit from mainstreaming, and how best to promote their acceptance by normal peers.

Intervention and "Compensatory Education"

A related area in which there now has been considerable productive interplay between basic and applied research has been in the planning and evaluation of preschool intervention programs. Several areas of research gave rise in the 1960s to an expectation that society could prepare economically disadvantaged children to profit from schooling by providing appropriate preschool intervention. For example, research with animals raised in barren or in stimulating environments had shown that impoverished environments often had adverse effects on the animals' learning ability. Much animal research had suggested also the existence of critical periods in development – periods of time, usually early in life, when a small amount of environmental input was particularly effective in producing significant changes in subsequent development. Some psychologists argued eloquently that similar critical periods probably existed for children's intellectual growth (Bloom, 1964; Hunt, 1961). These and other factors gave rise to a number of intervention programs, including Project Head Start.

Early evaluations of intervention programs were encouraging. For example, a common finding was that Head Start children showed a 10-point increase in their IQs. However, enthusiasm for intervention programs waned in 1969 with the publication of a study known as the Westinghouse Report. This report, based on the comparison of Head Start graduates and children who had not attended Head Start, concluded that Head Start children's IQ advantage disappeared soon after the children entered school, and that Head Start graduates showed little difference from non-Head Start graduates in the early grades. This document, plus an influential article by Arthur Jensen in the *Harvard Educational Review* (Jensen, 1969) gave rise to a wave of pessimism about the value of preschool intervention.

For several reasons, however, it is now clear that the notion that intervention programs are ineffective is a myth that deserves to be dispelled. One of these reasons is the existence of evidence that programs such as Head Start have resulted in gains in children's social competence (Zigler, 1973; Zigler & Trickett, 1978). The mere fact of the existence of Head Start in a community appears to be associated with an improvement of health and educational services available to children and families (Kirschner, 1970). There also has been evidence that intervention results in changes in children's motivation to use their intellectual abilities. One of the first benefits of applied research in intervention was to contribute to basic knowledge about the determinants of children's performance on IQ tests. Research in which children's motives during testing have been influenced directly has shown that disadvantaged children often bring a number of negative motives into a test situation. If these motivational problems, such as fear of the examiner and fear of being tested, are alleviated, the children's IQs have been found to increase by as much as 10 points (Jacobson, Berger, Bergman, Millham, & Greeson, 1971; Seitz, Abelson, Levine,

& Zigler, 1975; Thomas, Hertzig, Dryman, & Hernandez, 1971; Zigler, Abelson, & Seitz, 1973; Zigler & Butterfield, 1968). The results of this research, thus, suggest that the initial 10-point IQ gains found in early studies of Head Start were not illusory, but neither were they indicative of any real intellectual changes in children. Rather, these results suggest that intervention programs may have their greatest benefit in helping to reduce negative motivational factors, and thus, permit children to perform at levels more commensurate with their actual abilities. In short, it was social competence, revealed by children's willingness to display their intellectual abilities, and not the abilities themselves, that a brief Head Start program had affected.

Another cause for optimism has been the results of long-term, longitudinal studies of intervention. The Westinghouse Study, as a cross-sectional study with known sampling problems, has been widely criticized (Campbell & Erlebacher, 1970; Smith & Bissell, 1970), and the significance of these methodological criticisms has been borne out by the fact that more appropriately conducted studies have generally shown that effects of intervention often do not "fade out." For example, in an unusually careful study, Miller and Dyer (1975) assigned children randomly to different kinds of preschool interventions, and found that there were significant differences several years later in ways meaningfully related to the kinds of programs the children had attended. The results of several longitudinal studies of preschool interventions also suggest long-term positive effects of intervention. Especially important is the result that fewer intervention group children than control children have needed to be placed in classes below their grade level or in special training classes (Lazar, Hubbell, Murray, Rosche, & Royce, 1977).

The chief implication of the intervention studies of the 1970s is that the result of an intervention appears to be commensurate with the effort that is invested in the intervention. Intensive programs begun in infancy, providing a broad array of services, and involving the entire family have had lasting and measurable benefits for intervention relative to control children long after the programs have ceased (Garber & Heber, 1977; Ramey, Collier, Sparling, Loda, Campbell, Ingram, & Finkelstein, 1976; Trickett, 1979). Preschool programs that have been followed by several years of additional intervention in elementary school have also had lasting positive effects, albeit less dramatic effects than those from the infant intervention studies (Seitz, Apfel, & Efron, 1978; Seitz, Apfel, & Rosenbaum, 1979).

The experience of the past two decades has taught us the folly of searching for any single "magic age" or "magic program" for children. The preschool years are important, but so are a child's school years and adolescence. Similarly, while any given program may have merit, there is greater value in providing an intervention center that has a group of programs – almost a cafeteria style approach letting families decide for themselves what they most need, whether it be day care, toddler care, inoculations, preschools, and so forth. The notion of such a "Child and Family Resource Program" is spelled out in a recent governmental report (Comptroller General, 1979), and existing evidence on the effects of such a comprehensive program is thus far highly favorable.

In summary, one may well ask whether, in intervention research, one should view the glass as being half full or half empty (Richmond, 1975). There now appears to be much evidence to support the optimistic response that it is half full and that we are likely to continue to add to its contents in the next decade.

Conclusion

Research relating to children has broadened considerably in recent years. The ideal for some scientists remains Pasteur's advice to work serenely in the quiet of the laboratory, but others now believe that a scientist's responsibilities must include a willingness to direct his or her research toward assuaging society's problems. Developmental psychologists are prone to take the latter position simply because it is difficult to study children without producing some kind of potentially useful information.

The breadth of research is evident clearly in the present overview. The focus is now on children in context – that is, not on children alone, but on children living in a complex world of family interactions and societal forces. The significance of food stamps, unemployment, and television commercials as forces to be reckoned with in understanding how children develop is recognized increasingly by psychologists. There is also an increased appreciation for the role of biology, and a willingness of theoreticians to consider both nature and nurture within a realistic balance. And finally, there is a healthy interplay of researchers from many areas attempting to come to grips with some of society's most challenging problems. Such problems as child abuse, how to meet the nation's needs for day care, how best to educate children, and when, how, and whether society should intervene in the lives of economically disadvantaged children are weighty issues that have drawn the talents of many dedicated researchers. Because of the growing concern of developmental psychologists for the social policy implications of research, the present status of research relating to children is much richer than was true only a decade ago and shows promise of even greater benefits to come.

Edward Zigler is Sterling Professor of Psychology and Victoria Seitz is Assistant Professor of Psychology at Yale University.

REFERENCES

Ainsworth, M.D.S. Attachment as related to mother-infant interaction. In J.S. Rosenblatt, R.A. Hinde, C. Beer, & M.C. Busnel (Eds.), *Advances in the study of behavior* (Vol. 9). New York: Academic Press, 1979.

Ainsworth, M.D.S. Attachment and child abuse. In G. Gerbner, C. Ross, & E. Zigler (Eds.), *Child abuse reconsidered: An analysis and agenda for action.* New York: The Free Press, in press.

Ainsworth, M.D.S., & Bell, S.M. Attachment, exploration, and separation: Illustrated by the behavior of one-year-olds in a strange situation. *Child Development,* 1970, 41, 49-67.

Ainsworth, M.D.S., & Bell, S.M. Mother-infant interaction and the development of competence. In K.J. Connolly & J.S. Bruner (Eds.), *The growth of competence.* New York: Academic Press, 1974.

Ainsworth, M.D.S., Bell, S.M., & Stayton, D.J. Infant-mother attachment and social development: "Socialization" as a product of reciprocal responsiveness to signals. In M.P.M. Richards (Ed.), *The integration of a child into a social world.* Cambridge, Massachusetts: Cambridge University Press, 1974.

Alvy, K.T. Preventing child abuse. *American Psychologist,* 1975, 30, 921-928.

Amir, Y. The effectiveness of the kibbutz-born soldier in the Israel Defense Forces. *Human Relations,* 1969, 22, 333-344.

Anastasi, A. Heredity, environment, and the question "how?" *Psychological Review,* 1958, 65, 197-208.

Armor, D.J. The evidence on busing. *The Public Interest,* 1972 (Serial No. 28), 90-126.

Baumrind, D.M. *Early socialization and the discipline controversy.* Morristown, New Jersey: General Learning Press, 1975.

Beit-Hallahmi, B., & Rabin, A.I. The kibbutz as a social experiment and as a child-rearing laboratory. *American Psychologist,* 1977, 32, 532-541.

Bell, R.Q. A reinterpretation of the direction of effects in studies of socialization. *Psychological Review,* 1968, 75, 81-95.

Bell, R.Q. Stimulus control of parent or caretaker behavior by offspring. *Developmental Psychology,* 1971, 4, 63-72.

Bell, R.Q., & Harper, L.V. *The effects of children on adults.* Hillsdale, New Jersey: Lawrence Erlbaum Associates, 1977.

Biller, H.B. *Father, child, and sex role.* Lexington, Massachusetts: D.C. Heath and Company, 1971.

Blehar, M.C. Anxious attachment and defensive reactions associated with day care. *Child Development,* 1974, 45, 683-692.

Blehar, M.C., Lieberman, A.F., & Ainsworth, M.D.S. Early face-to-face interaction and its relation to later infant-mother attachment. *Child Development,* 1977, 48, 182-194.

Bloom, B. *Stability and change in human characteristics.* New York: John Wiley & Sons, Inc., 1964.

Bowlby, J. *Attachment and loss.* Vol. 1. *Attachment.* New York: Basic Books, Inc., Publishers, 1969.

Bowlby, J. *Attachment and loss.* Vol. 2. *Separation: Anxiety and anger.* New York: Basic Books, Inc., Publishers, 1973.

Brazelton, T.B. *Infants and mothers: Differences in development.* New York: Dell Publishing Co., Inc., 1969.

Bronfenbrenner, U. The origins of alienation. *Scientific American,* 1974, 231, 53-61.

Bronfenbrenner, U. Toward an experimental ecology of human development. *American Psychologist,* 1977, 32, 513-531.

Bryan, J.H. Children's cooperation and helping behaviors. In E.M. Hetherington (Ed.), *Review of child development research* (Vol. 5). Chicago: University of Chicago Press, 1975.

Campbell, D.T., & Erlebacher, A. How regression artifacts in quasi-experimental evaluations can mistakenly make compensatory education look harmful. In J. Hellmuth (Ed.), *Compensatory education: A national debate.* Vol. III of *The disadvantaged child.* New York: Brunner/Mazel, Inc., 1970.

Caplan, G., Mason, E.A., & Kaplan, D.M. Four studies of crisis in parents of prematures. *Community Mental Health Journal,* 1965, 1, 149-161.

Clark, K.B. *Prejudice and your child.* Boston: Beacon Press, 1955.

Clark, K.B., & Clark, M.P. Racial identification and preference in Negro children. In T.M. Newcomb & E.L. Hartley (Eds.), *Readings in social psychology.* New York: Henry Holt, 1947.

Clarke-Stewart, K.A. And daddy makes three: The father's impact on mother and child. *Child Development,* 1978, 49, 466-478.

Clarke-Stewart, K.A. Evaluating parental effects on child development. In L.S. Shulman (Ed.), *Review of research in education.* Vol. 6, 1978. Itasca, Illinois: F.E. Peacock Publishers, Inc., 1979.

Coleman, J.S., Campbell, E., Hobson, C., McPartland, J., Mood, A., Weinfeld, F., & York, R. *Equality of educational opportunity.* Washington, D.C.: U.S. Government Printing Office, 1966.

Comptroller General of the United States. *Early childhood and family development programs improve the quality of life for low-income families.* Report to the Congress of the United States, United States General Accounting Office, Report HRD-79-40, February 6, 1979.

Daniel, J.H., & Hyde, J.N. Working with high-risk families. *Children Today,* 1975, 4, 23-25, 36.

DeLozier, P. An application of attachment theory to the study of child abuse. Unpublished doctoral dissertation, California School of Professional Psychology, Los Angeles, 1978.

Devereux, E.C., Shouval, R., Bronfenbrenner, U., Rodgers, R.R., Kav-Venaki, S., Kiely, E., & Karson, E. Socialization practices of parents, teachers and peers in Israel: The kibbutz versus the city. *Child Development,* 1974, 45, 269-281.

Elmer, E. *Children in jeopardy.* Pittsburgh, Pennsylvania: University of Pittsburgh Press, 1967.

Etaugh, C. Effects of maternal employment on children: A review of recent research. *Merrill-Palmer Quarterly,* 1974, 20, 71-98.

Fein, G.G., & Clarke-Stewart, K.A. *Day care in context.* New York: John Wiley & Sons, Inc., 1973.

Fossey, D. More years with mountain gorillas. *National Geographic,* 1971, 140, 574-586.

Fraiberg, S. *Every child's birthright.* New York: Basic Books, Inc., Publishers, 1977.

Freedman, D.G. *Human infancy: An evolutionary perspective.* Hillsdale, New Jersey: Lawrence Erlbaum Associates, 1974.

Garbarino, J. A preliminary study of some ecological correlates of child abuse: The impact of socioeconomic stress on mothers. *Child Development,* 1976, 47, 178-185.

Garber, H., & Heber, F.R. The Milwaukee Project: Indications of the effectiveness of early intervention in preventing mental retardation. In P. Mittler (Ed.), *Research to practice in mental retardation* (Vol. 1). Baltimore, Maryland: University Park Press, 1977.

Gelles, R.J. Child abuse as psychopathology: A sociological critique and reformulation. *American Journal of Orthopsychiatry,* 1973, 43, 611-621.

George, C., & Main, M. Social interactions of young abused children: Approach, avoidance and aggression. *Child Development,* in press.

Gerbner, G., Ross, C., & Zigler, E. *Child abuse: An agenda for action.* New York: Oxford University Press, in press.

Gesell, A. Early evidence of individuality in the human infant. *Scientific Monthly,* 1937, 45, 217-225.

Gesell, A., & Ilg, F.L. *Infant and child in the culture of today.* New York: Harper & Row, Publishers, 1943.

Gil, D.G. Physical abuse of children. Findings and implications of a nation-wide survey. *Pediatrics,* 1969, 44, No. 5, Part 2 (Supplement), 857-864.

Goodall, J. Chimpanzees of the Gombe Stream Reserve. In I. DeVore (Ed.), *Primate behavior: Field studies of monkeys and apes.* New York: Holt, Rinehart & Winston, Inc., 1965.

Goodman, H., Gottlieb, J., & Harrison, R.H. Social acceptance of EMRs integrated into a nongraded elementary school. *American Journal of Mental Deficiency,* 1972, 76, 412-417.

Goodwin, D.W., Schulsinger, F., Hermanson, L., Guze, S.B., & Winokur, G. Alcohol problems in adoptees raised apart from alcoholic biological parents. *Archives of General Psychiatry,* 1973, 28, 238-243.

Gottesman, I.I. Genetic aspects of intelligent behavior. In N. Ellis (Ed.), *Handbook of mental deficiency.* New York: McGraw-Hill, 1963.

Gottesman, I.I., & Shields, J. *Schizophrenia and genetics — a twin study vantage point.* New York: Academic Press, 1972.

Gottlieb, J., & Budoff, M. Social acceptability of retarded children in nongraded schools differing in architecture. *American Journal of Mental Deficiency,* 1973, 78, 15-19.

Gruen, G., Ottinger, D., & Ollendick, T. Probability learning in retarded children with differing histories of success and failure in school. *American Journal of Mental Deficiency,* 1974, 79, 417-423.

Handel, A. [Self-concept of the kibbutz adolescent.] *Megamot,* 1961, 11, 142-159.

Harlow, H.F. The development of affectional patterns in infant monkeys. In B.M. Foss (Ed.), *Determinants of infant behaviour* (Vol. 1). New York: John Wiley & Sons, Inc., 1961.

Harlow, H.F. The maternal affectional system. In B.M. Foss (Ed.), *Determinants of infant behaviour* (Vol. 3). New York: John Wiley & Sons, Inc., 1963.

Hartup, W.W. Origins of friendship. In M. Lewis & L. Rosenblum (Eds.), *Friendship and peer relations.* New York: John Wiley & Sons, Inc., 1975.

Hartup, W.W. Two social worlds: Family relations and peer relations. In M. Rutter (Ed.), *Scientific foundations of developmental psychiatry.* London: Heinemann, in press.

Heston, L.L. The genetics of schizophrenic and schizoid disease. *Science,* 1970, 167, 249-256.

Hetherington, E.M., Cox, M., & Cox, R. The aftermath of divorce. Paper presented at the 84th Annual Convention of the American Psychological Association, Washington, D.C., September 3, 1976.

Hirsch, J. Behavior-genetic analysis and its biosocial consequences. *Seminars in Psychiatry,* 1970, 2, 89-105.

Hoffman, M.L. Father absence and conscience development. *Developmental Psychology,* 1971, 4, 400-406.

Hunt, J. McV. *Intelligence and experience.* New York: The Ronald Press Company, 1961.

Hurt, M., Jr. *Child abuse and neglect: A report on the status of the research.* Washington, D.C.: U.S. Government Printing Office, Department of Health, Education, and Welfare Publication No. (OHD) 74-20, 1975.

Jacobson, L.I., Berger, S.E., Bergman, R.L., Millham, J., & Greeson, L.E. Effects of age, sex, systematic conceptual learning, acquisition of learning sets, and programmed social interaction on the intellectual and conceptual development of preschool children from poverty backgrounds. *Child Development,* 1971, 42, 1399-1415.

Jensen, A.R. How much can we boost IQ and scholastic achievement? *Harvard Educational Review,* 1969, 39, 1-123.

Johnston, C.M., & Deisher, R.W. Contemporary communal child rearing: A first analysis. *Pediatrics,* 1973, 52, 319-326.

Jolly, A. The study of primate infancy. In K.J. Connolly & J.S. Bruner (Eds.), *The growth of competence.* New York: Academic Press, 1974.

Kaffman, M. A comparison of psychopathology: Israeli children from kibbutz and from urban surroundings. *American Journal of Orthopsychiatry,* 1965, 35, 509-520.

Kagan, J., & Klein, R.E. Cross-cultural perspectives on early development. *American Psychologist,* 1973, 28, 947-961.

Kagan, J., Klein, R.E., Finley, G.E., Rogoff, B., & Nolan, E. A cross-cultural study of cognitive development. *Monographs of the Society for Research in Child Development,* 1979, 44 (5, Serial No. 180).

Kamin, L.J. *Science and politics of I.Q.* Potomac, Maryland: Lawrence Erlbaum Associates, 1974.

Kaplan, D.M., Smith, A., Grobstein, R., & Fischman, S.E. Family mediation of stress. *Social Work,* 1973, 18, 60-69.

Kaye, E. *The family guide to children's television: What to watch, what to miss, what to change, and how to do it.* New York: Pantheon Books, Inc., 1974.

Keniston, K., & The Carnegie Council on Children. *All our children: The American family under pressure.* New York: Harcourt Brace Jovanovich, Inc., 1977.

Kessen, W. (Ed.). *Childhood in China.* New Haven, Connecticut: Yale University Press, 1975.

Kidd, K.K. A genetic perspective on stuttering. *Journal of Fluency Disorders,* 1977, 2, 259-269.

Kirschner Associates. A national survey of the impacts of Head Start centers on community institutions. Report prepared for the U.S. Office of Child Development, May 1970.

Klaus, M.H., Jerauld, R., Kreger, N.C., McAlpine, W., Steffa, M., & Kennell, J.H. Maternal attachment: Importance of the first post-partum days. *The New England Journal of Medicine,* 1972, 286, 460-463.

Kohen-Raz, R. Mental and motor development of kibbutz, institutionalized, and home-reared infants in Israel. *Child Development,* 1968, 39, 489-504.

Lamb, M.E. The role of the father: An overview. In M.E. Lamb (Ed.), *The role of the father in child development.* New York: John Wiley & Sons, Inc., 1976.

Lazar, I., Hubbell, V.R., Murray, H., Rosche, M., & Royce, J. The persistence of preschool effects: A long-term follow-up of 14 infant and preschool experiments. Final report to the Administration on Children, Youth and Families, U.S. Department of Health, Education, and Welfare, Grant No. 18-76-07843, 1977.

Lewis, M., & Rosenblum, L. (Eds.). *Friendship and peer relations.* New York: John Wiley & Sons, Inc., 1975.

Lynn, D.B. *The father: His role in child development.* Monterey, California: Brooks/Cole Publishing Co., 1974.

Miller, L.B., & Dyer, J.L. Four preschool programs: Their dimensions and effects. *Monographs of the Society for Research in Child Development,* 1975 (Serial No. 162).

Milowe, I.D., & Lourie, R.S. The child's role in the battered child syndrome. *Abstracts of the Society for Pediatric Research,* 1964, 1079.

Money, J., Hampson, J.G., & Hampson, J.L. Imprinting and the establishment of gender role. *Archives of Neurology and Psychiatry,* 1957, 77, 333-336.

Nevo, B. Personality differences between kibbutz born and city born adults. *American Journal of Psychology,* in press.

Newberger, E.H. The myth of the battered child syndrome. *Current Medical Dialog,* 1973, 40, 327-334. Reprinted in S. Chess & A. Thomas (Eds.), *Annual progress in child psychiatry and child development, 1974.* New York: Brunner/Mazel, Inc., 1975.

Newberger, E.H., & Hyde, J.N. Child abuse. Principles and implications of current pediatric practice. *Pediatric Clinics of North America,* 1975, 22, 695-715.

Newberger, E.H., Reed, R., Daniel, J., Hyde, J., & Kotelchuck, M. Toward an etiologic classification of pediatric social illness: A descriptive epidemiology of child abuse and neglect, failure to thrive, accidents and poisonings in children under four years of age. Paper presented at the Biennial Meeting of the Society for Research in Child Development, Denver, Colorado, April 11, 1975.

Provence, S., Naylor, A., & Patterson, J. *The challenge of daycare.* New Haven, Connecticut: Yale University Press, 1977.

Rabin, A.I. The sexes: Ideology and reality in the Israeli kibbutz. In G.M. Seward & L.C. Williamson (Eds.), *Sex roles in a changing society.* New York: Random House, Inc., 1970.

Rabin, A.I. *Kibbutz studies.* East Lansing, Michigan: Michigan State University Press, 1971.

Rabin, A.I., & Goldman, H. The relationship of severity of guilt to intensity of identification in kibbutz and non-kibbutz children. *Journal of Social Psychology,* 1966, 69, 159-163.

Ramey, C.T., Collier, A.M., Sparling, J.J., Loda, R.A., Campbell, F.A., Ingram, D.L., & Finkelstein, N.W. The Carolina Abecedarian Project: A longitudinal and multidisciplinary approach to the prevention of developmental retardation. In T. Tjossem (Ed.), *Intervention strategies for high-risk infants and young children.* Baltimore, Maryland: University Park Press, 1976.

Rettig, K.S. Relation of social systems to intergenerational changes in moral attitudes. *Journal of Personality and Social Psychology,* 1966, 4, 400-414.

Richmond, J.B. The state of the child: Is the glass half-empty or half-full? *American Journal of Orthopsychiatry,* 1974, 44, 484-490.

Rosenthal, D., & Kety, S.S. (Eds.). *The transmission of schizophrenia.* London: Pergamon Press, 1968.

Rubenstein, J.L., & Howes, C. Caregiving and infant behavior in day care and in homes. *Developmental Psychology,* 1979, 15, 1-24.

St. John, N.H. *School desegregation: Outcomes for children.* New York: John Wiley & Sons, Inc., 1975.

Sameroff, A.J., & Chandler, M.J. Reproductive risk and the continuum of caretaking casualty. In F.D. Horowitz, E.M. Hetherington, S. Scarr-Salapatek, & G. Siegel (Eds.), *Review of child development research* (Vol. 4). Chicago: University of Chicago Press, 1975.

Scarr, S., & Weinberg, R.A. IQ test performance of black children adopted by white families. *American Psychologist,* 1976, 31, 726-739.

Scarr-Salapatek, S. Genetic determinants of infant development: An overstated case. In L.P. Lipsitt (Ed.), *Developmental psychobiology: The significance of infancy.* Hillsdale, New Jersey: Lawrence Erlbaum Associates, 1976.

Schaffer, H.R., & Emerson, P.E. The development of social attachments in infancy. *Monographs of the Society for Research in Child Development,* 1964, 29, (3, Serial No. 94).

Seitz, V., Abelson, W.D., Levine, E., & Zigler, E. Effects of place of testing on the Peabody Picture Vocabulary Test scores of disadvantaged Head Start and non-Head Start children. *Child Development,* 1975, 46, 481-486.

Seitz, V., Apfel, N.H., & Efron, C. Long-term effects of early intervention: The New Haven Project. In B. Brown (Ed.), *Found: Long-term gains from early intervention. AAAS 1977 Selected Symposium 8.* Boulder, Colorado: Westview Press, 1978.

Seitz, V.R., Apfel, N.H., & Rosenbaum, L. Projects Head Start and Follow Through: A longitudinal evaluation of adolescents. In M.J. Begab, H. Garber, & H.C. Haywood (Eds.), *Proceedings of the NICHD Conference on the Prevention of Retarded Development in Psychosocially Disadvantaged Children, Madison, Wisconsin, July 25, 1978.* Madison, Wisconsin: University of Wisconsin Press, in press.

Sharabany, R. Intimate friendship among kibbutz and city children and its measurement. Unpublished doctoral dissertation, Cornell University, 1974.

Silver, L.B., Dublin, C.C., & Lourie, R.S. Does violence breed violence? Contributions from a study of the child abuse syndrome. *American Journal of Psychiatry,* 1969, 126, 404-407.

Smith, M.S., & Bissell, J.S. Report analysis: The impact of Head Start. *Harvard Educational Review,* 1970, 40, 51-104.

Stern, L. Prematurity as a factor in child abuse. *Hospital Practice,* 1973, 8, 117-123.

Thomas, A., & Chess, S. *Temperament and development.* New York: Brunner/Mazel, Inc., 1977.

Thomas, A., Chess, S., & Birch, H.G. *Temperament and behavior disorders in children.* New York: New York University Press, 1968.

Thomas, A., Hertzig, M.E., Dryman, I., & Fernandez, P. Examiner effect in IQ testing of Puerto Rican working-class children. *American Journal of Orthopsychiatry,* 1971, 41, 809-821.

Trickett, P.K. Yale Child Welfare Research Program: An independent follow-up five years later. Paper presented at the 1979 Biennial Meeting of the Society for Research in Child Development, San Francisco, California, March 1979.

Turnbull, C.M. *The mountain people.* New York: Simon & Schuster, Inc., 1973.

U.S. Department of Commerce. *Bureau of the Census,* 1970.

Webb, R. (Ed.). *Social development in daycare.* Baltimore, Maryland: Johns Hopkins Press, 1977.

Weisz, J.R. Transcontextual validity in developmental research. *Child Development,* 1978, 49, 1-12.

White House Conference on Children. *Profiles on children.* Washington, D.C.: U.S. Government Printing Office, 1970.

Wilson, E.O. *Sociobiology: The new synthesis.* Cambridge, Massachusetts: Harvard University Press, 1975.

Wilson, E.O. *On human nature.* Cambridge, Massachusetts: Harvard University Press, 1978.

Zigler, E. Project Head Start: Success or failure? *Learning,* 1973, 1, 43-47.

Zigler, E. Welcoming a new journal. *Journal of Applied Developmental Psychology,* in press.

Zigler, E., Abelson, W.D., & Seitz, V. Motivational factors in the performance of economically disadvantaged children on the Peabody Picture Vocabulary Test. *Child Development,* 1973, 44, 294-303.

Zigler, E., & Butterfield, E.C. Motivational aspects of changes in IQ test performance of culturally deprived nursery school children. *Child Development,* 1968, 39, 1-14.

Zigler, E., & Muenchow, S. Mainstreaming: The proof is in the implementation. *American Psychologist,* in press.

Zigler, E., & Trickett, P.K. IQ, social competence, and evaluation of early childhood intervention programs. *American Psychologist,* 1978, 33, 789-798.

Zimbardo, P.G., & Ruch, F.L. *Psychology and life* (9th ed.). Glenview, Illinois: Scott, Foresman and Company, 1975.

CHAPTER 7

STATUS OF RESEARCH ON YOUTH

Robert E. Grinder

Growing up is an intricate process. During adolescence, as the body grows, cognitive capacity develops for achieving high levels of awareness of both self and society. Adolescents, in contrast to children, acquire the potential to cope with risks to physical and mental health, experiment with new forms of social interaction, explore career prospects, and develop perspectives on social and moral issues. Adolescence, thus, is represented in this review as the most consequential period in the life span for attaining the attributes that underlie future personal and social growth.

The circumstances of growing up in a complex world of technology present adolescents with unprecedented freedom, but social opportunities may be emasculated when options are frustrated. The delinquency, incorrigibility, drug abuse, suicide, pregnancy, and unemployment among adolescents today suggest that the problems of growing up are indeed widespread. They stem from such sources as inadequate socialization, rejection of traditional values in favor of new lifestyles, and structural weaknesses in society. Researchers in the scholarly disciplines have tended to sentimentalize the virtues of adolescents and have responded traditionally to the problems by attempting to assess what has "gone wrong" – to look after-the-fact for why troubles arose. This approach has contributed little other than descriptive studies and scattered theoretical insights. A new trend, thus, is emerging. Contemporary researchers in the field of adolescence increasingly are producing knowledge to better understand the factors that affect youth's potential to grow up constructively. New findings gradually are displacing conventional wisdom, and scholarship is being articulated in 100s of journals sponsored by the academic disciplines. Several new journals are devoted wholly to research in adolescence, and a new journal in adolescent medicine will appear in 1980.

A comprehensive theory of adolescence, however, is only an image on the horizon. Theoretical linkages among concepts and principles are limited across areas of interest; hence, communication among researchers in different disciplines is uncommon. Moreover, the rise of egalitarian social values has highlighted the significance of sex, ethnicity/race, exceptionality, and social class in attaining access to social opportunities in nearly every dimension of growing up. Research pertaining to these variables, however, has centered more in demonstration projects than on theoretical integration. This review, therefore, is designed to accomplish two major purposes: (1) to reflect current trends in adolescent research, especially as these trends influence relations between research and applied social policies; and (2) to mirror the state-of-the-art in adolescent research by presenting an encyclopedic examination of a broad range of contemporary contributions to the field. The discussion is divided into six major sections – Somatic Health, Mental Health, Intellect and Special Abilities, Cognitive Development and Socialization, Delinquency: Adjudication and Prevention, and Adolescence and Work.

Somatic Health

Adolescents, 12 to 17 years of age, are less healthy than convention would have us believe. They suffer a wide range of somatic health problems, including joint abnormalities, skeletal deficits, cardiovascular difficulties, and neurological problems (Brunswick, 1979). These findings have been confirmed in several studies and have led to intensified research to improve adolescent health services (Brunswick, 1976).

Adolescents seek medical help for a wide variety of acute, short-term health problems, with which few physicians and health clinics possess the breadth to deal. Researchers thus urge study to improve coordination among health care services, and importantly, to utilize occasions of visits to medical facilities as opportunities to promote attitudes toward preventive health care (Parcel, Nader, & Meyer, 1977; Simons & Downs, 1977). Since research indicates that ethnicity affects patterns of adolescent medical utilization, further studies will consider carefully the underlying effects of sociocultural and socioeconomic variables; e.g., the health care of urban black adolescents apparently is related to whether their mothers were born in urban or rural areas (Brunswick, Boyle, & Tarica, 1979); and a recent triethnic study suggests that white adolescents tend to rely on private physicians, black adolescents draw upon public health facilities, and hispanic adolescents seek limited health care (Parcel et al., 1977).

Chronic disease prevention programs in high schools traditionally have been didactic, have failed to involve adolescents personally, and hence, generally have been ineffectual. These programs, nonetheless, constitute a critical component of adolescent health care services, for they can address not only current health concerns but risk factors prevalent early in life for such adult disorders as heart disease, cancer, and stroke. A recently implemented program, "Know Your Body" (KYB), provides an example of an exemplary model that is designed to reduce both cigarette smoking and intake of saturated fats and cholesterols (Williams, Arnold, & Wynder, 1977). KYB screens risk factors, gives students their own results in a "health passport," and follows up with an intervention program that is integrated into existing high school curricula. Preliminary findings suggest that adolescent eating, exercise, and weight patterns may be altered through the program; planned longitudinal studies will enable researchers to determine whether KYB produces durable change (Botvin et al., in press).

Mental Health

Mental health services for adolescents developed slowly in the United States. A series of Task Force reports in the 1960s on child and adolescent mental health, however, heightened interest in the development of effective programs in community clinics and schools, and a great deal of research subsequently ensued (Shore & Mannino, 1976). The five topics described below, which range from concerns of program development to adolescent sexual expression, indicate not only the breadth of the scholarship that falls today within the framework of adolescent mental health, but the vigor of research activity in the field.

Assessment, Prevention, and Treatment

The epidemiology of health disorders recently has become the center of intense study in child and adolescent mental health (Gersten & Susser, 1979). Researchers are investigating (1) the history of emotional and behavioral disorders, (2) the extent to which disorders are continuous with "normal" development, (3) characteristics of populations associated with high and low risk of disorders, (4) optimum timing of intervention, and (5) the effect of disorders on long-term adaptation (Achenbach, 1978; Gersten, Langner, & Simcha-Fagan, 1979; Gersten & Susser, 1979). Moreover, validated behavioral checklists are beginning to replace structured interviews in adolescent clinic evaluations in the hope that the standardized procedures will produce more accurate diagnoses (Achenbach, 1978; Achenbach & Edelbrock, 1978, 1979; Gleser et al., 1977). Researchers are asking, too, whether diagnostic and therapeutic procedures can be deployed to involve parents, teachers, and peers. Robins (1978), for example, investigated ways patterns of peer interaction may facilitate resolution of adolescent emotional disorders, and Gittelman (1978) explored how nonprofessionals might use behavior modification and learning principles in dealing with excessively shy, aggressive, or hyperkinetic adolescents.

Automobile Accidents and Suicide

Automobile accidents and suicide are among the leading causes of adolescent mortality, but research has yet (1) to chart the epidemiology of either automobile accidents or suicide, and (2) to predict accident-proneness or suicide-proneness from psychological assessment (Sobel & Underhill, 1976). Contemporary theory suggests, however, that a cluster of symptoms associated with family stress and social isolation may predict both phenomena, and this perspective is beginning to contribute hypotheses for analyses of large data banks. Sobel & Underhill (1976), for example, searched among measures of family stress, parent-child relations, and adolescent impulsivity, rebelliousness, and thrill-seeking for factors associated with adolescent accidents in New Hampshire, and Ford et al. (1979) found that suicide patterns among Metropolitan Cleveland youth stem from early disruption of family life and poor occupational adjustment.

Researchers also have examined data furnished by state agencies to determine whether adolescent collision rates are higher where the legal drinking age has been lowered from 21 to 19 or 18. After conducting a thorough review of recent findings, Whitehead & Ferrence (1976) inferred that the lowered drinking age has produced "a sizeable increase" in adolescent accidents. The researchers suggested systematic study of the consequences of either raising the legal drinking age or invoking harsher penalties for minor traffic infractions, as possible strategies to lower collision rates among youth.

Anorexia Nervosa

Anorexia nervosa occurs largely among adolescent girls before 16 years of age and is characterized by self-induced starvation, frequent vomiting, distorted body image, and bizarre attitudes toward food. Although a relatively rare emotional disorder, it is discussed here for two reasons: (1) incidences of the illness are increasing and advances in endocrinology have led to a resurgence of research to improve both diagnostic and treatment procedures (Davis et al., 1978); and (2) the ongoing research illustrates the kind of activity underway in many different aspects of adolescent mental health (Gallagher, Heald, & Garell, 1976). Rollins & Piazza (1978) argued, for example, that diagnosis should be based primarily on body image distortion and secondarily on weight phobia, sense of inadequacy, and actual weight loss. Since the etiology of anorexia nervosa is unknown, researchers also are asking whether it evolves from misdirected attempts to achieve autonomy and independence and/or disrupted patterns of family communication (Davis et al., 1978). Finally, treatment today is more complex than simply enforcing weight gain and removing the patient from the family. Geller et al. (1978) have reported success with behavior modification procedures in eliminating chronic vomiting and modifying patterns of family interaction. Goetz et al. (1977), who have examined patients between 5 and 20 years after treatment, on the other hand, have had greater success with psychotherapy. Davis et al. (1978) presently are comparing various combinations of behavior modification and drug treatment (periactin). Preliminary results suggest that behavior modification is useful in inducing weight gain in less severe cases; periactin is more effective in severe cases, but overall, the drug is no more effective than a placebo.

Substance Abuse

Since the war in Vietnam, substance abuse research has become an important new dimension in the field of adolescent health (DuPont, 1978). "Abuse" of drugs, alcohol, and tobacco, however, is a matter of subjective judgment, depending upon whether one is a user, law enforcement agent, parent, counselor, therapist, and so forth (Apsler, 1978). A great deal more is known about alcohol and tobacco than drugs in respect to both distinction between usage and abuse and effect of abuse. The symptoms of different drugs are dissimilar, for example, and empirical research concerning them is hardly 10 years old. However, follow-up studies of the heavy drug users of the late 1960s are beginning to appear (Ramos & Gould, 1978; Wallach, 1977). Further, researchers today are starting to encompass analyses of interactions among drug, alcohol, and tobacco consumption within their investigations, and in some instances, to consider usage as a multiple substance outcome variable (Dembo et al., 1978; Donovan & Jessor, 1978; Paton & Kandel, 1978).

Researchers in the substance abuse field now are demonstrating empirically that psychological factors, sex, and ethnicity can account for aspects of substance usage (Paton & Kandel, 1978). They are revealing, too, that across these variables, character-

istics of peer involvement are particularly critical predictors of multiple usage, and they are exploring peer-group circumstances that distinguish adolescents who progress to chronic abuse from those who stop or restrict usage to recreational situations (Burkett, 1977; Dembo et al., 1978; Donovan & Jessor, 1978; Huba, Wingard, & Bentler, 1979).

Contemporary research apparently has yet to inform educational programs. A recent report of the House Select Committee on Narcotics Abuse and Control has proclaimed, for example, that educational materials supplied by the National Institute on Drug Abuse to New York City were "virtually useless" and often used "scare tactics of the late '60s" ("House Committee," 1979). Many program developers, nonetheless, appear cognizant of current findings, and they are aware also that few school-based programs are sufficiently comprehensive to address both the social and multicultural concerns of all drug involved youth (Dembo et al., 1978). Research and program planning, thus, are beginning to converge on the belief that future programs should look upon substance usage, not as a product of either personal or group pathology, but as an environmental effort to establish personal and social identity in a particular cultural setting (Dembo et al., 1978; Weiner, 1976; Wynder & Hoffman, 1979).

Adolescent Pregnancy and Sexual Expression

The personal consequences of adolescent pregnancy are difficult to assess because longitudinal data are scarce; however, Russ-Eft, Sprenger, & Beever (1979) recently have reported the results of a follow-up study of 500 men and 500 women who had been adolescent parents. The study linked adolescent parenting behavior to demographic and aptitude measures, and in turn, to educational, occupational, familial, and quality-of-life outcomes. The data confirm empirically many of the general assumptions about the negative consequences of pregnancy; e.g., early termination of education, unsatisfactory employment record, and poor marital satisfaction.

The Committee on Adolescence, American Academy of Pediatrics (1979), has issued to its members a brief report on "teenage pregnancy," that highlights several areas in which vigorous research is underway; e.g., severity of gynecological problems (Rauh & Burket, 1979); contraceptive use and knowledge (Hansson, Jones, & Chernovetz, 1979; Hornick, Doran, & Crawford, 1979; Finkel & Finkel, 1978; Thompson & Spanier, 1978); major medical risks of pregnancy to both mother and child (McKenry, Walters, & Johnson, 1979); and such social hazards as interrupted schooling (Hansen, Stroh, & Whitaker, 1978). However, as McKenry et al. (1979) pointed out, research activity in adolescent pregnancy has yet to be matched by expansion of reliable empirical data. Studies have been based on small, unrepresentative clinical populations, and important variables, like "contraceptive usage," have not been operationally defined.

Research on adolescent sexual expression, however, has entered the mainstream of academic psychology during the past 10 years (Peplau & Hammen, 1977). Studies have been conducted regarding the sex information of adolescents (Dickinson, 1978; Gebhard, 1977), characteristics of adolescent sexual behavior, including incidences of kissing, petting, sexual intimacy, and masturbation (Diepold & Young, 1979; Hopkins, 1977; Peplau,

Rubin, & Hill, 1977), cognitive perspectives on sexual arousal (Rook & Hammen, 1977), effects of cohabitation on preparation for marriage (Ridley, Peterman, & Avery, 1978), and changing societal attitudes toward sexual permissiveness and the traditional double standard of sexual morality (Cvetkovich et al., 1978; Dignan & Anspaugh, 1978; Laner, Laner, & Palmer, 1978; Kelley, 1978).

Intellect and Special Abilities

When Lewis M. Terman devised the first, practical, wide-range test of intelligence in 1916, individual differences in performance were expected to be consistent across a broad class of conceptual skills involving comprehension, reasoning, and problem solving (Jensen, 1979). The differences were presumed to be a product of heredity, and to prevail across not only conceptual activities but also performance skills associated with leadership, creativity, and artistic expression. Terman viewed intellect as a generalized trait, and he was interested especially in adolescents who attained high test scores because of their apparent potential to distinguish themselves in whatever activities they chose to pursue. He and his colleagues, however, were unable to explain why gifted persons differed so much in their attainments and why persons closer to average test scores often achieved distinction. The early investigators had failed to recognize that intellect is comprised of several distinct abilities (Gowan, 1977; Jensen, 1979; Stanley, 1979), that social opportunities differentially affect the course of their development, and that all children and adolescents possess potentialities of indeterminate limits (Feldman, 1979).

Although conceptual progress in the development of special abilities was at a standstill between 1920 and 1960 (Gowan, 1977), a better understanding of it today is leading to new proposals for enriching the lives of adolescents. Contemporary strategy calls for organization of learning opportunities – in such areas as mathematics, literature, science, drama, dance, music, mime, and so forth – to stimulate adolescents, whatever their initial skills, to advance on the basis of their interests to the extent of their capabilities. The new approach is avowedly costly, for adolescents in the process of developing their talents must have access to accelerated school or community programs and to theater productions, youth orchestras, dance companies, and art centers ("Creative Energy," 1977).

The development of enrichment opportunities is proceeding slowly. However, the Study of Mathematically Precocious Youth (SMPY), a project initiated at Johns Hopkins University in 1971, supplies a successful example of what can be accomplished. SMPY assists youth, who reason extremely well mathematically, find challenging, worthwhile learning experiences. The program offers a "smorgasbord" of opportunities (skipping grades, special high school courses, and college classes) for rapid acceleration (Stanley, 1979). SMPY researchers have studied sex differences in adolescent attitudes toward accelerated study, stereotypes teachers and parents hold of gifted adolescents, and importantly, steps capable adolescents take personally to raise their knowledge in mathematics. Longitudinal research is planned into the 21st Century.

Although application of the SMPY model has been restricted to the area of mathematics, a parallel program will begin in 1980 for adolescents with high verbal ability.

Forthcoming research will evaluate the extent to which the SMPY model is applicable to a wide range of talent, and features of the model will become prototypes for programs designed eventually, perhaps, to meet the needs and interests of average and low-aptitude adolescents (Bereiter, 1976).

Cognitive Development and Socialization

The capacity to represent reality symbolically, to reason without reference to direct experience, and to contemplate causality among relationships becomes a possibility during adolescence. The development of cognitive abilities is fostered ideally in an environment that offers occasions for direct contact with stimulating activities, opportunity to experience the consequences of one's actions, and vicarious experience through books, films, television, and so forth. In contrast, cognitive potential may never surface where minimal demands are made on verbal and problem solving skills and/or where childhood learning is dominated by authoritarian demands, high anxiety or emotionality, and little opportunity to reason about what one is ordered to do. Cognitive development and learned behavior interact in ways exceedingly complex and diverse (Ramirez & Castaneda, 1974). Elkind (1975, p. 49) observed, for example, that only a few topics currently are being investigated, and he said, "we have only just begun to develop methods for explaining the manner in which adolescents think." The two topics discussed below, therefore, are representative mainly of the difficulties researchers encounter in this phase of adolescent study.

Generality of Formal Operations

According to Piaget (1970), growing children, in successive stages, make symbolic representations, engage in logical thought, and deal with verbal propositions. He has named the final stage, "formal operational," to represent how adolescents "operate" in the environment. Piaget's theory presumes that it is extension of biological organization that enables adolescents to understand complex experiences objectively; hence, one might expect formal operations to be a fairly universal attainment. After a series of experiments in the early 1960s, however, Elkind (1975) concluded that adolescents do not apply them uniformly. Dulit (1972) argued that formal reasoning is a function of cultural "demand" for it. Although researchers now generally concur that socially acquired dispositions affect the development of formal operations, little is known precisely about how these factors interact (Berzonsky, 1978; Mangan, 1978; Piaget, 1970; Ronning, 1977). The work of formal operations "remains an open question" (Elkind, 1975).

Moral Development

Social scientists commonly agree that moral development involves capacity to abstract moral principles, learn emotional self-control, and transcend self-interest in moral decision making. It is, then, expected to be a function of both moral judgment and ethical behavior; the former is presumed to be a product of cognitive development, and the latter, of social learning. From the viewpoint of both cognitive and social-learning theorists, the two dimensions of morality are expected to become strongly related as moral development takes place. On the one hand, formal operations appear to be prerequisite to abstract moral reasoning, and as adolescents acquire the capacity to apply moral principles, they presumably explicitly will choose ethical standards, which, in turn, will enable them to select appropriate action in specific moral dilemmas. On the other hand, ethical behavior appears to be facilitated through behavioral contacts with socializing agents, who explicitly emphasize accepting responsibility *for* conduct, and who also stress self-appraisal *of* conduct, which, in turn, should lead to abstract moral reasoning (Hoffman, 1975).

Research has yet to establish empirically, however, the extent to which moral judgments and ethical behavior are related at any level of development. The problem from a research perspective is more methodological than conceptual. It stems from the ethical prohibition against enticing persons in experiments to compromise their moral integrity in order to measure individual differences in honesty, responsibility, courage, virtue, self-control, etc. Since study of ethical behavior indeed involves direct challenge to personal integrity, whereas, that of moral judgment merely utilizes analytic skills, investigations of adolescent morality for over a decade have focused almost entirely on the dimensions of moral reasoning. This concentration has been criticized for its preoccupation with abstract thought structures and neglect of moral action and commitment (Oldenquist, 1979; Sullivan, 1977), but what else are researchers to do? They await a methodology that will enable investigators to safeguard the personal rights of adolescents while (1) assessing individual differences in ethical conduct, (2) comparing judgments and conduct, and thereby, (3) establishing an empirical basis for identifying the developmental characteristics of moral maturity. And importantly, the new methodology will open an area to research of considerable social concern – the empirical study of adolescent shoplifting, pilfering, petty stealing, and so forth.

Delinquency: Adjudication and Prevention

The juvenile justice system stems from the doctrine of *parens patriae,* an early tenet of English common law that vested the courts with the responsibilities of wise parents in order to ensure the welfare of youth. In the United States, as elsewhere, the imperatives of the parent surrogate role often have overshadowed the constitutionally protectable rights of youth, and many young people, thus, have been overly processed through the court bureaucracy and excessively detained in correctional facilities. Interest in strength-

ening the civil rights of youth and in augmenting the human-services dimensions of juvenile justice, however, has led recently to significant changes in the system. The U.S. Supreme Court has affirmed that the Bill of Rights and the 14th Amendment guarantee due process to children (*In Gault,* 1967); it also declared that an adolescent is entitled to the same procedural safeguards as an adult (*In Winship,* 1970). Adolescent offenders now are distinguished statutorily either as juvenile delinquents (criminals), for offenses that would be considered a crime if they were adults – robbery, vandalism, shoplifting, prostitution – or as status offenders, for misdeeds that would be ignored by the courts if engaged in by adults – truancy, incorrigibility, promiscuity, running away from home.

The objectives of the juvenile justice system are centered not on punishment but on prevention and rehabilitation. The system is organized to assign transgressors differentially among facilities. Adolescents may be returned home, for example, or sent to a foster home, halfway house, group home, or correctional facility. The process begins with apprehension, at which time police may dismiss the matter or refer the adolescent to juvenile court. An intake unit of the court then will determine whether to resolve the case informally or to forward it to a juvenile judge for disposition. Since less than half of all juvenile referrals to court intake wind up in formal court hearings, Cohen & Kluegel (1979) argued that decisions made at the intake stage may be the most critical in the entire juvenile justice system.

Studies of decision making in the system suggest that adolescents do not receive the individual treatment that it was established to provide. First, adolescents are sometimes labeled on the basis of their demeanor, especially when evidence linking them to an offense is limited (Lundman, Sykes, & Clark, 1978); subsequently, the label more than the offense may dictate what transpires. Daniels (1979) and other investigators believe that when adolescents are labeled as "wrong" and parents as "right," as in the instance of status offenders, the labeling may foster a self-fulfilling prophecy that will lead to further intransigence. Second, the sex of the adolescent appears to exert strong systematic influence on how cases are handled; the effect of race and class bias, on the other hand, is less extensive than generally believed (Cohen & Kluegel, 1979; Barton, 1976). A recent survey of adolescents assigned to correctional facilities, for example, revealed that twice as many status as criminal offenders were in custody, and 70% of these young people were females. Researchers maintain that a double standard of morality governs adjudicative practices (Armstrong, 1977; Chesney-Lind, 1977). Parents tend to expect greater obedience and chastity from girls than boys, and, in upholding higher standards for them, to view them as relatively more incorrigible. Parents, therefore, are more likely to bring girls than boys to the attention of the court for status offenses. The juvenile justice system, in exercising its mandate to sustain traditional family mores, may incarcerate adolescent girls because they cannot get along with their parents – not because they have violated any statute or committed a crime (Conway & Bogdan, 1977).

The trend in juvenile correctional programs is from institutionalization to community-based treatment, a procedure by which youth are said to be "diverted" from correctional to community services. Proponents hold that diversion programs reduce recidivism, promote human dignity, and avoid labeling vices; detractors suggest that diversion programs, by their leniency, may lead to disregard of the law and an increase in crime rates, differential treatment along sex, age, and social class lines, and detention of

adolescents for indeterminate periods (Erickson, 1978; Klein, 1976; Lundman, 1976). Diversion programs, however, are so new that little is known empirically about either how they function or what they are accomplishing (Gibbons & Blake, 1976). On the whole, researchers suggest that educational and rehabilitative programs designed to prevent adolescent delinquency have been largely unsuccessful. Barton & Sarri (1979) reported that youth released from juvenile correction programs seldom are prepared to cope with pressures in their community environment. Furthermore, the 30-year follow-up of the Cambridge-Somerville youth study, which traced 500 men, half of whom were assigned randomly in 1939 to a treatment program when they were between 5 and 13 years of age, shows that the intervention effects may have been negative – youth who had been treated were more likely to have committed a second crime, revealed signs of alcoholism, manifested serious mental illness, reported stress-related illnesses, attained occupations of lower prestige, and died younger (McCord, 1978). According to Lundman & Scarpitti (1978), who have reviewed the reported results of over 6,500 recent programs, "the inescapable conclusion" is that they have failed in preventing law violation. The researchers call for cessation of "endlessly replicating the same tired techniques among stereotyped populations of youth." They also set forth several recommendations for improving subsequent delinquency research: publicize both negative and positive results; describe program components operationally; expand theory to encompass both psychological and sociological factors; indicate empirically whether changes in delinquent behaviors occur; and strive to design projects as experiments that include both treatment and control groups.

Adolescence and Work

About half of the unemployed in the current workforce are young people between ages 16 and 24, and circumstances today are reminiscent of those James B. Conant described a generation ago as "social dynamite." As Taggart & Davidson (1978, p. 1) observed in the introduction to a recent conference report, beyond recognition that youth unemployment is a critical national issue: "There is little agreement about the actual dimensions of the job deficit, the severity and implications of joblessness, its causes, or the effectiveness of alternative public policies." The papers included in the report, nonetheless, which were contributed primarily by economists, provide a useful perspective on several important aspects of the current youth employment problem: (1) large-scale, point-in-time national surveys of employment rates mask enormous fluxes in youth employment; (2) inschool work experience facilitates transition to work; (3) positive work attitudes in adolescence affect employment stability and success; (4) inadequate labor market knowledge plagues minority and lower social class adolescents; (5) legitimate employment is a factor in combating youth crimes; (6) poor work records in adolescence may affect subsequent job opportunities, especially for minorities; and (7) restrictive child labor and minimum hourly wage standards tend to confine youth employment to high-turnover, transient jobs and to discourage some youth from entering the labor force.

The conference participants identified several topics as sufficiently provocative to warrant indepth analyses. The conference commentary on three of these topics – work ideology, school-to-work transition, and job training – is extended here briefly:

Work Ideology

A report of the Metropolitan Applied Research Center (Lewis et al., 1976, p. 163) revealed that high job attrition is an "overriding fact" in youth manpower programs. Cordes & Goldfarb (1978) suggested that youth unemployment can be explained as much by low job attachment as by the unavailability of jobs. Many youth apparently demand work that offers them recognition as individuals, ways of contributing to society, security, and opportunity for leisure (Berryman, 1978; Fetters, 1976; Flanagan, 1973; Walther, 1976). A great deal of work available to youth, however, is characteristically unsatisfying, unchallenging, and intrinsically uninteresting. Production technology has so mechanized work that much of it requires skills that can be gained easily, and no section of the occupational structure is expanding to accommodate the fulfillment ideology (Harman, 1978). As a consequence, many youth who see limited prospects for advancement and satisfaction in work appear to be using leisure time to satisfy personal values.

Leisure activities for many adolescents, thus, may be less a recreational byproduct of hard work than a means of obtaining the status, pleasure, and sense of worth inaccessible in work opportunities. Youth employment policies, however, have long stressed economically productive work as the sine qua non of personal satisfaction. Programs tend to be designed on the assumption that conventional work attitudes – ambition, task persistence, and goal directedness – pre-exist and await nurturance. Contemporary perspective suggests, in contrast, that adolescents, as a function of sex, ethnic, and social class factors, probably are differentially adopting aspects of traditional and emerging work ideologies.

Factors in the High School to Work Transition

The transition from school to work is characterized by substantial student uncertainty and indecisiveness (Nolfi et al., 1978). Adolescent aspirations often are unrealistically high with respect to wages, hours, working conditions, and responsibilities. The discrepancy between expectations and reality may result in part from inadequate job market information, and the hiatus may be particularly acute among minorities, females, and lower class white males (Andrisani, 1978; Clark & Summers, 1978; Cordes & Goldfarb, 1978; Lewis et al., 1976). Two recent investigations show, for example, that youth differ by ethnicity and social class in their job seeking practices; e.g., white adolescents rely on personal contacts (friends, teachers, family); whereas, minorities tend to use classified want ads and employment agencies (Becker, 1979; Dayton, 1979). And according to Dayton (1979), white youth are more likely than minority youth, who tend to view finding a job a matter of luck, to analyze their interests and abilities in selecting

work. Several investigators, therefore, maintain that youth unemployment might be reduced markedly by better preparing youth to enter the labor market (Andrisani, 1978; U.S. Department of Labor, 1978; Dayton, 1979; Lewis, 1976). Super & Kidd (1979, p. 268) would acquaint adolescents with hiring practices, employee-management relations, occupational and economic trends, and career patterns. Lewis et al. (1976) have developed a model for instructing black adolescent girls in filling out applications, job interviewing, and test taking, and for learning about job opportunities through industry tours, field internships, films, workshops, and small seminars.

Millions of federal dollars have been invested within the past few years in the name of "career education" to better acquaint young people in a school context about prospects in the workforce (Noeth & Prediger, 1978). Career education probably contributes to youth employment to the extent that it helps less goal-oriented youth confront career alternatives and choices (Berryman, 1978). Career education also aims to develop in adolescents a life-long perspective on work, leisure, and daily living. The development of exemplary projects, however, has been plagued by the inability of evaluators to show that program participation actually makes a difference in the adolescent transition to employment. The career education model, nonetheless, embodies considerable heuristic merit, and hopefully, new research models will permit empirical examination of its premises (Baker, 1979).

Current Applied Policy Initiatives

A series of Federal Acts, from the Civilian Conservation Corps (CCC) of the 1930s to the Youth Employment and Demonstration Projects Act (YEDPA) of 1977, has been initiated to resolve youth's employment problems. The YEDPA Act authorizes expenditures for a variety of "innovative demonstration projects" to explore effective ways of assisting adolescents complete high school, enter the workforce, and attain job stability and achievement. Target groups include in-school and out-of-school adolescents, summer-school students, and young people under the jurisdiction of the criminal justice system.

Whereas early Acts were primarily economic stimulus packages designed to stimulate income flow by subsidizing jobs, YEDPA also emphasizes the significance of research to learn more about the motivational and attitudinal antecedents of adolescent workforce participation. One-hundred and fifteen million dollars of the 1978 appropriation, thus, was allocated to both implement and evaluate pilot "entitlement projects," in which dropout and dropout-prone youth in 17 communities were guaranteed part-time work during the school year and full-time work during the summer months, so long as they continued working toward a diploma or equivalency certificate. The first 7 months of the pilot projects now have been evaluated, and preliminary results suggest that the programs are relatively more successful with inschool youth than with dropouts, who apparently do not find the guarantee of a job per se enough of an incentive to return to school (Ball et al., 1979). Researchers also have investigated recently the highly complex issues local governments face in coordinating YEDPA programs among schools and community-based agencies (Colmen & Wurzburg, 1979; Wurzburg, 1979). In brief, the YEDPA commitment

to youth development differs from its predecessors in its stress upon research and development; let us hope that the precedent it is establishing will be augmented in future youth employment policies.

Conclusion

Several noteworthy trends are apparent in the field of adolescent research: the range of topics under investigation is burgeoning; the investigations are leading to research paradigms that foster communications across diverse disciplines; and empirically derived principles are superseding conventional wisdom and intuition in informing youth development policies. Moreover, communication among members of the adolescent research community has been strengthened immensely by the recent development of the Interagency Research Information System (IRIS), a computerized information retrieval system (Social Research Group, 1979). IRIS includes data on federally sponsored research, development, demonstration and evaluation projects for the purpose of sharing information and coordinating planning among agencies of the government. It is now providing researchers with detailed, up-to-date descriptions of the status of federal initiatives in adolescence. The current impact of research upon applied policy and demonstration projects cannot be sustained indefinitely, however, at present levels of funding. Federal outlays annually for youth welfare, training, and employment encumber billions of federal, state, and local government dollars; whereas, funds for knowledge-production research may range from only 100 to 150 million dollars. The hiatus between dollars for social programs and dollars for research has expanded continuously for several years, and should the trend continue, a time may be reached when the few existing linkages between theory and practice will be stretched to the point of collapse, and then, the benumbing power of conventional wisdom may again reign unchecked.

Robert E. Grinder is Director, Center for Adolescent Research, Evaluation, and Service at Arizona State University. Dr. Grinder expresses appreciation to Gene T. Chavez and Edward A. Nelsen for helpful comments on early drafts and to Christy A. Duff for her assistance in preparing the manuscript.

REFERENCES

Achenbach, T.M. Psychopathology of childhood: Research problems and issues. *Journal of Consulting Psychology,* 1978, 46, 759-776.

Achenbach, T.M., & Edelbrock, C.S. The classification of child psychopathology: A review and analysis of empirical efforts. *Psychological Bulletin,* 1978, 85, 1275-1301.

Achenbach, T.M., & Edelbrock, C.S. The child behavior profile: II. Boys aged 12-16 and girls aged 6-11 and 12-16. *Journal of Consulting Psychology,* 1979, 47, 223-233.

Andrisani, P.J. The establishment of stable and successful employment careers: The role of work attitudes and labor market knowledge. *Conference Report on Youth Unemployment: Its Measurement and Meaning.* Washington, D.C.: U.S. Department of Labor, 1978.

Apsler, R. Untangling the conceptual jungle of drug abuse. *Contemporary Drug Problems,* 1978, 7, 55-80.

Armstrong, G. Females under the law – "protected" but unequal. *Crime and Delinquency,* 1977, 23, 109-120.

Baker, O.V. Criteria for the evaluation of career education activities. *Journal of Research and Development in Education,* 1979, 12, 9-13.

Ball, J., Diaz, W., Leiman, J., Mandel, S., & McNutt, K. *The youth entitlement demonstration: An interim report on program implementation.* New York: Manpower Demonstration Research Corporation, 1979.

Barton, W.H. Discretionary decision-making in juvenile justice. *Crime and Delinquency,* 1976, 22, 470-480.

Barton, W.H., & Sarri, R. Where are they now? A follow-up study of youth in juvenile correction programs. *Crime and Delinquency,* 1979, 25, 162-166.

Becker, H.J. Personal networks of opportunity in obtaining jobs: Racial differences and effects of segregation. Paper presented at the meeting of the American Educational Research Association, San Francisco, 1979.

Bereiter, C.E. SMPY in social perspective. In D.P. Keating (Ed.), *Intellectual talent: Research and development.* Baltimore: Johns Hopkins University Press, 1976.

Berryman, S.E. Youth unemployment and career education. *Public Policy,* 1978, 26, 29-69.

Berzonsky, M.D. Formal reasoning in adolescence: An alternate view. *Adolescence,* 1978, 13, 279-290.

Botvin, G.J., Cantlon, A., Carter, B.J., & Williams, C.L. Reducing adolescent obesity through a school health program. *Journal of Pediatrics,* 1979, in press.

Brunswick, A.F. Indicators of health status in adolescence. *International Journal of Health Services,* 1976, 6, 475-492.

Brunswick, A.F. Adolescent health needs: A developmental and psychosocial perspective. Unpublished manuscript, Columbia University, 1979.

Brunswick, A.F., Boyle, J.M., & Tarica, C. Who sees the doctor? A study of black adolescents. *Social Science and Medicine,* 1979, 13A, 45-56.

Burkett, S.R. School ties, peer influence, and adolescent marijuana use. *Pacific Sociological Review,* 1977, 20, 181-202.

Chesney-Lind, M. Judicial paternalism and the female status offender. *Crime and Delinquency,* 1977, 23, 121-130.

Clark, K.B., & Summers, L.H. The dynamics of youth unemployment. (Working paper No. 274). Cambridge: National Bureau of Economic Research, August, 1978.

Cohen, L.E., & Kluegel, J.R. Selecting delinquents for adjudication. *Journal of Research in Crime and Delinquency,* 1979, 16, 143-163.

Colmen, J., & Wurzburg, G. *Involving schools in employment and training programs for youth.* Washington, D.C.: National Council on Employment Policy, 1979.

Committee on Adolescence, American Academy of Pediatrics. Statement on teenage pregnancy. *Pediatrics,* 1979, 63, 795-796.

Conway, A., & Bogdan, C. Sexual delinquency: The persistence of a double standard. *Crime and Delinquency,* 1977, 23, 131-135.

Cordes, J.J., & Goldfarb, R.S. Methods of allocating funds to alleviate teenage unemployment problems. *Conference report on youth unemployment: Its measurement and meaning.* Washington, D.C.: U.S. Department of Labor, 1978.

Creative energy and the adolescent. In C. Quinn and C. Hanks (Eds.), *Coming to our senses.* New York: McGraw-Hill, 1977.

Cvetkovich, G., Grote, B., Lieberman, E.J., & Miller, W. Sex role development and teenage fertility-related behavior. *Adolescence,* 1978, 13, 231-236.

Daniels, W.L. Status offenders: Who they are, where they come from, and how we treat them. Paper presented at the meeting of the American Educational Research Association, San Francisco, 1979.

Davis, J.M., Casper, R., Garver, D., Dekimenjian, H., & Pandey, G. Anorexia nervosa: Drug and behavior therapy. *Report of the Laboratory for the Study of Adolescence.* Chicago: Michael Reese Hospital and Medical Center, 1978.

Dayton, C.W. *The job search and youth employment.* Palo Alto: American Institutes for Research, 1979.

Dembo, R., Burgos, W., Babst, D.V., Schmeidler, J., & La Grand, L.E. Neighborhood relationships and drug involvement among inner city junior high school youths. *Journal of Drug Education,* 1978, 8, 231-252.

Dickinson, G.E. Adolescent sex information sources: 1964-1974. *Adolescence,* 1978, 52, 653-658.

Diepold, J., Jr., & Young, R.D. Empirical studies of adolescent sexual behavior. *Adolescence,* 1979, 53, 45-64.

Dignan, M., & Anspaugh, D. Permissiveness and premarital sexual activity: Behavioral correlates of attitudinal differences. *Adolescence,* 1978, 52, 703-711.

Donovan, J.E., & Jessor, R. Adolescent problem drinking. *Journal of Studies on Alcohol,* 1978, 39, 1506-1524.

Dulit, E. Adolescent thinking a la Piaget: The formal stage. *Journal of Youth and Adolescence,* 1972, 1, 281-301.

DuPont, R.L. The drug abuse decade. *Journal of Drug Issues,* 1978, 8, 173-187.

Elkind, D. Recent research on cognitive development in adolescence. In S.E. Dragastin & G.H. Elder, Jr. (Eds.), *Adolescence in the life cycle.* New York: John Wiley and Sons, Inc., 1975.

Erickson, M.L. Schools for crime? *Journal of Research in Crime and Delinquency,* 1978, 15, 31-34.

Feldman, D. Toward a nonelitist conception of giftedness. *Phi Delta Kappan,* 1979, 60, 660-663.

Fetters, W.B. *National longitudinal study of the high school class of 1972.* Washington, D.C.: National Center for Health Statistics, 1976.

Finkel, M.L., & Finkel, D.J. Male adolescent contraceptive utilization. *Adolescence,* 1978, 51, 443-451.

Flanagan, J.C. Some pertinent findings of project TALENT. *Vocational Guidance Quarterly,* 1973, 22, 92-126.

Ford, A.B., Rushforth, N.B., Rushforth, N., Hirsch, C.S., & Adelson, L. Violent death in a metropolitan community: II. Changing patterns in suicides (1959-1974). *American Journal of Public Health,* 1979, 69, 459-464.

Gallagher, J.R., Heald, F.P., & Garell, D.C. *Medical care of the adolescent* (3rd ed.). New York: Appleton-Century-Crofts, 1976.

Gebhard, P.H. The acquisition of basic sex information. *Journal of Sex Research,* 1977, 13, 148-169.

Geller, M.I., Kelley, J.A., Traxler, W.T., & Marone, F.J., Jr. Behavioral treatment of an adolescent female's bulimic anorexia: Modification of immediate consequences and antecedent conditions. *Journal of Clinical and Child Psychology,* 1978, 7, 138-142.

Gersten, J.C., Langner, T.S., & Simcha-Fagan, O. Developmental patterns of types of behavioral disturbance and secondary prevention. *International Journal of Mental Health,* 1979, 7, 132-149.

Gersten, J.C., & Susser, M. Introduction. *International Journal of Mental Health,* 1979, 7, 3-5.

Gibbons, D.C., & Blake, G.F. Evaluating the impact of juvenile diversion programs. *Crime and Delinquency,* 1976, 22, 411-420.

Gittelman, M. Child mental health: The need for alternatives to modest proposals. *International Journal of Mental Health,* 1978, 7, 5-17.

Gleser, G., Seligman, R., Winget, C., & Rauh, J.L. Adolescents view their mental health. *Journal of Youth and Adolescence,* 1977, 6, 249-263.

Goetz, P.L., Succop, R.A., Reinhart, J.B., & Miller, A. Anorexia nervosa in children: A follow-up study. *American Journal of Psychiatry,* 1977, 47, 597-603.

Gowan, J.C. Background and history of the gifted-child movement. In J.C. Stanley, W.C. George, & C.H. Solano (Eds.), *The gifted and the creative: A 50-year perspective.* Baltimore: Johns Hopkins University Press, 1977.

Hansen, H., Stroh, G., & Whitaker, K. School achievement: Risk factor in teenage pregnancies? *American Journal of Public Health,* 1978, 68, 753-759.

Hansson, R.O., Jones, W.H., & Chernovetz, M.E. Contraceptive knowledge: Antecedents and implications. *Family Coordinator,* 1979, 28, 29-34.

Harman, W.W. Chronic unemployment: An emerging problem of postindustrial society. *The Futurist,* 1978, 12, 209-214.

Hoffman, M.L. Moral internalization, parental power, and the nature of parent-child interaction. *Developmental Psychology,* 1975, 11, 228-239.

Hopkins, J.R. Sexual behavior in adolescence. *Journal of Social Issues,* 1977, 33, 67-85.

Hornick, J.P., Doran, L., & Crawford, S.H. Premarital contraceptives usage among male and female adolescents. *Family Coordinator,* 1979, 28, 181-190.

House Committee Releases Report on School Drug Abuse. *Education Daily,* May 9, 1979.

Huba, G.J., Wingard, J.A., & Bentler, P.M. Beginning adolescent drug use and peer and adult interaction patterns. *Journal of Clinical Psychology,* 1979, 47, 265-275.

Jensen, A.R. The nature of intelligence and its relation to learning. *Journal of Research and Development in Education,* 1979, 12, 79-95.

Kelley, J. Sexual permissiveness: Evidence for a theory. *Journal of Marriage and Family,* 1978, 40, 455-468.

Klein, M.W. Issues and realities in police diversion programs. *Crime and Delinquency,* 1976, 22, 421-427.

Laner, M.R., Laner, R.H., & Palmer, C.E. Permissive attitudes toward sexual behaviors: A clarification of theoretical explanations. *Journal of Sex Research,* 1978, 14, 137-144.

Lewis, H., Clark, M.P., Cloward, R.A., Frost, O.P., Jones, J.A., Johnson, S., & Nasatar, E.D. *Improving employment possibilities for female black teenagers in New York City.* New York: Metropolitan Applied Research Center, 1976.

Lundman, R.J. Will diversion reduce recidivism? *Crime and Delinquency,* 1976, 22, 428-437.

Lundman, R.J., & Scarpitti, F.R. Delinquency prevention: Recommendations for future projects. *Crime and Delinquency,* 1978, 24, 207-220.

Lundman, R.J., Sykes, R.E., & Clark, J.P. Police control of juveniles. *Journal of Research in Crime and Delinquency,* 1978, 15, 74-91.

Mangan, J. Piaget's theory and cultural differences. *Human Development,* 1978, 21, 170-189.

McCord, J. A 30-year follow-up of treatment effects. *American Psychologist,* 1978, 33, 284-289.

McKenry, P.C., Walters, L.H., & Johnson, C. Adolescent pregnancy: A review of the literature. *Family Coordinator,* 1979, 28, 17-28.

Noeth, R.J., & Prediger, D.J. Career development over the high school years. *Vocational Guidance Quarterly,* 1978, 26, 244-254.

Nolfi, G.J., Fuller, W.C., Corazzini, A.J., Epstein, W.H., Freeman, R.B., Manski, C.F., Nelson, V.I., & Wise, D.A. *Experiences of recent high school graduates.* Lexington: Lexington Books, 1978.

Oldenquist, A. Moral education without moral education. *Harvard Educational Review,* 1979, 49, 240-247.

Parcel, G.S., Nader, P.R., & Meyer, M.P. Adolescent health concerns, problems, and patterns of utilization in a triethnic urban population. *Pediatrics,* 1977, 60, 157-164.

Paton, S.M., & Kandel, D.B. Psychological factors and adolescent illicit drug use: Ethnicity and sex differences. *Adolescence,* 1978, 13, 187-200.

Peplau, L.A., & Hammen, C.L. Social psychological issues in sexual behavior: An overview. *Journal of Social Issues,* 1977, 33, 1-6.

Peplau, L.A., Rubin, Z., & Hill, C.T. Sexual intimacy in dating relationships. *Journal of Social Issues,* 1977, 33, 86-109.

Piaget, J. Piaget's theory. In P.H. Mussen (Ed.), *Carmichael's manual of child psychology* (Vol. 1). New York: John Wiley & Sons, Inc., 1970.

Ramos, M., & Gould, L.C. Where have all the flower children gone? A five-year follow-up of a natural group of drug users. *Journal of Drug Issues,* 1978, 8, 75-84.

Rauh, J.L., & Burket, R.L. Adolescent sexual activity and resulting gynecologic problems. *Human Sexuality,* 1979, 13, 56-65.

Ridley, C.A., Peterman, D.J., & Avery, A.W. Cohabitation: Does it make for a better marriage? *Family Coordinator,* 1978, 27, 129-136.

Robins, L.N. Evaluation of preventive and therapeutic measures in child mental health. *International Journal of Mental Health,* 1978, 7, 129-147.

Rollins, N., & Piazza, E. Diagnosis of anorexia nervosa. *Journal of Child Psychiatry,* 1978, 17, 126-137.

Ronning, R.R. Modeling effects and developmental changes in dealing with a formal operations task. *American Educational Research Journal,* 1977, 14, 213-223.

Rook, K.S., & Hammen, C.L. A cognitive perspective on the experience of sexual arousal. *Journal of Social Issues,* 1977, 33, 7-29.

Russ-Eft, D., Sprenger, M., & Beever, A. Antecedents of adolescent parenthood and consequences at age 30. *Family Coordinator,* 1979, 28, 173-179.

Simons, R., & Downs, E.F. Ambulatory care patterns of urban adolescents. *Studies in adolescent health.* (DHEW Publication No. (HSA) 77-5701). Washington, D.C.: U.S. Government Printing Office, 1977.

Shore, M.F., & Mannino, F.V. Mental health services for children and youth: 1776-1976. *Journal of Clinical Child Psychology,* 1976, 5, 21-24.

Sobel, R., & Underhill, R. Family disorganization and teenage auto accidents. *Journal of Safety Research,* 1976, 8, 8-18.

Social Research Group, George Washington University. *Interagency research information system: A user's manual.* Washington, D.C.: Social Research Group, George Washington University, 1979.

Stanley, J.C. The study and facilitation of talent for mathematics. In A.H Passow (Ed.), *The gifted and the talented: Their education and development.* Seventy-eighth Yearbook of the National Society for the Study of Education. Chicago: University of Chicago Press, 1979.

Sullivan, E.V. A study of Kohlberg's structural theory of moral development: A critique of liberal social science ideology. *Human Development,* 1977, 20, 352-376.

Super, D.E., & Kidd, J.M. Vocational maturity in adulthood: Toward turning a model into a measure. *Journal of Vocational Behavior,* 1979, 14, 255-270.

Taggart, R., & Davidson, N.B. Introduction. *Conference report on youth unemployment: Its measurement and meaning.* Washington, D.C.: U.S. Department of Labor, 1978.

Thompson, L., & Spanier, G.B. Influence of parents, peers, and partners on the contraceptive use of college men and women. *Journal of Marriage and Family,* 1978, 40, 481-492.

U.S. Department of Labor. *Young women and employment: What we know and need to know about the school-to-work transition.* Washington, D.C.: U.S. Department of Labor, 1978.

Wallach, A. Re-entry: A study of the movement of young drug users toward mainstream society. *Psychiatry,* 1977, 40, 242-257.

Walther, R.H. Analysis and synthesis of DOL experience in youth transition to work programs. Final report to the U.S. Department of Labor, Grant No. 21-717-76-16, 1976.

Weiner, R.I. Shifting perspectives in drug-abuse policy. *Crime and Delinquency,* 1976, 22, 347-358.

Whitehead, P.C., & Ferrence, R.G. Alcohol and other drugs related to young drivers' traffic accident involvement. *Journal of Safety Research,* 1976, 8, 65-72.

Williams, C.L., Arnold, C.B., & Wynder, E.L. Primary prevention of chronic disease beginning in childhood. *Preventive Medicine,* 1977, 6, 344-357.

Wurzburg, G. *Overview to the local focus on youth.* Washington, D.C.: National Council on Employment Policy, 1979.

Wynder, E.L., & Hoffman, D. Tobacco and health. *The New England Journal of Medicine,* 1979, 300, 894-903.

CHAPTER 8

STATUS OF RESEARCH ON FAMILIES

Reuben L. Hill

Research about family phenomena today is thriving in most of the world. Wherever social scientists are permitted to work, the family is among their chief interests. The chief contributors in industrial societies are sociologists, home economists, psychiatrists, demographers, psychologists, economists, legal scientists, and historians; whereas, anthropologists, sociologists, and economists are the major family research entrepreneurs in the developing countries. Monitoring their outputs is a major challenge for research librarians.

Love, courtship, marriage, parenthood, and the family only recently have been considered seriously as objects for systematic, scholarly study. The great majority of even descriptive scholarly writing about the family has been done in the 20th Century, and most of the search for scientific explanations of marriage and family behaviors has been concentrated in the 3 decades since World War II. Contributions to folklore about the intimacies of marriage and family life, by contrast, have accumulated for centuries from sages, poets, philosophers, novelists, playwrights, prophets, jesters, and cynics. This chapter on the status of family research is concerned with the youthful scientific study of marriage and family behavior rather than with its venerable predecessor, the centuries old lore of folk wisdom and poetic insights.

For our markers of the growth and development of the science of "family watching," we are fortunate to be able to draw on a series of trend reports, bibliographic inventories, and research reviews developed by the Minnesota Family Study Center at the University of Minnesota.[1]

The range and scope of studies included within the broad definition of research about marriage and family behavior can be illustrated by the topical classification in Exhibit 8.1, which we shall use in assessing trends in emphasis over historical time periods.

Supplementing the five volumes of the Minnesota Inventory of Marriage and Family Research, which provide the basis for trends in topical emphasis over historical periods, are the surveys undertaken in 1956 by Reuben Hill (1958) and in 1968 by John Mogey (1971) for the Committee on Family Research of the International Sociological Association. These two reports, each covering a 12-year period, classified the several studies reported on the degree of sophistication of research design; namely, on quality of data sources, on the use of sampling, on attention to measurement, and on adequacy of data analysis.

Long-term Trends in Family Research

Six long-term and continuing trends appear to characterize changes in family research: (1) an exponential growth in number of publications; (2) increasing acceptance of

Exhibit 8.1

Topical Categories and Subcategories for Classifying Marriage and Family Research Publications over Historical Time Periods, 1900-1978.*

I. Macroscopic Studies of Marriage and Family as Institutions:

Historical studies prior to 1900: Family and social change, industrialization and urbanization impacts; Ethnographic studies of marriage customs, kinship rules, and family structure; Comparative cross-societal, interclass, and interethnic studies.

II. Family Transactions with Social Networks, Formal and Informal Associations and Bureaucracies:

Studies of interplay between:
a. Family and kin-friends-neighbors
b. Family and school, church, government, and helping professions
c. Family and economy, market, and work

III. Family as a Small Group Association:

Interaction patterns within the family; Family development over the life cycle; Family role structures and functions; Parental family contexts of child development.

IV. Mate Selection Patterns, Procedures, and Processes:

Assortative mating studies; Love and preferential mating studies; Dating, courtship, and decision to marry studies.

V. Marriage and Divorce:

Marriage adjustment and prediction; Divorce, separation, desertion studies; Intermarriage studies.

VI. Family Reproductive Behavior:

Family size preferences; Family and differential fertility; Birth control practices and their family correlates; Illegitimacy.

VII. Family and Sexual Behavior:

Premarital, marital, and extramarital sexual behaviors; Incest.

VIII. Families with Special Problems:

Family crises and adjustment; Multiproblem families; Family and natural disasters; Families of mentally retarded, mentally ill, delinquents, alcoholics; Families with incomplete structures, widowed, divorced, deserted; Families and geographic mobility.

IX. Minority Group Membership, Social Class, and the Family:

Black-American family patterns; Chinese-American family patterns; Indian-American family patterns; Mexican-American family patterns; Japanese-American family patterns; Jewish-American family patterns; Puerto Rican family patterns.

X. Surveys of Institutional Aids to Families:

Education for marriage and parenthood programs; Marriage and family counseling; Reviews of impacts of national policies and programs, family allowances and social security provisions.

XI. Assessments of Family Research:

Critiques of methodology, sampling, data collection and analysis; Critiques of theory development; Trend reports and inventories of research.

---

*The scope of the 11 categories above is broad enough to catch macroscopic as well as microscopic studies of the family, studies of broad institutional changes as well as micro-observational studies of episodes of interaction in marriage and family associations.

Excluded by our criteria are the following kinds of published materials:

1. Nonsystematic work such as marriage manuals, advice to parents, sex manuals, and other essays on marriage and morals.

2. Studies of child behavior, as such, that focus clearly on the child rather than on marriage or family behavior. Excluded, therefore, are studies of juvenile delinquency, sex behavior, psychological ecology, and most personality development studies.

3. Studies of population behavior, such as birth rates, death rates, marriage rates, divorce rates, as well as epidemiological studies of health and morbidity except where these are related behaviorally with marriage and family as a dependent variable.

4. Studies of women or men as such: For example, changing status of women, problems of housewives, and studies of manpower and womanpower utilization.

5. Studies of levels of living, household economics, housing, savings, insurance and family acquisitions. These are classified more appropriately as studies in consumption economics.

6. Kinship and genealogical studies, unless they link with family behavior directly.

family phenomena as a legitimate subject for scientific study; (3) a change in emphasis from macroscopic, large-scale comparative analyses of matrimonial institutions to microscopic explorations of living families; (4) a change from solo entrepreneurial type research efforts to networks of teams coordinating their research efforts; (5) a trend toward accretion of theory by making explicit the conceptual framework used and cumulating empirically tested hypotheses into inductive theories; and (6) increasing attention to scientific methods of designing, executing, and analyzing research, including attention to representative sampling, measurement of variables and inductive statistics in data analysis.

(1) Increasing Quantity of Publications.

From examination of more than 2,500 periodicals for the period 1900 through 1972, the Minnesota Family Study Center, University of Minnesota estimated that the collective output of this scientific enterprise is 25,720 scholarly books or articles, of which, roughly, two-thirds are in English and one-third in 30 other languages (Aldous & Dahl, 1974). It is estimated that the current total output as of 1977-78 is running at 2,150 publications annually (Olson, 1979).

Exhibit 8.2 has been constructed to depict the exponential growth rate in research and scholarly publications from 1900 to 1979. For readers interested in developments in family scholarship prior to 1900, the recent work of Ronald Howard (1975) is most informative. For the first 3 decades of the 20th Century, neither English nor foreign language publications was sufficient to imply legitimacy of scholarly investigations of the family; no more than 20 to 30 publications a year were recorded throughout the world. In the midst of the Great Depression, the volume of scholarly writing about the family picked up, never again to level off. Foreign language publications about the family lagged behind those in English for half a century. Publications of overseas references included in the Minnesota Inventory constituted fewer than 10% of the titles listed from 1900 to the end of World War II, but by 1968 this proportion had risen over a third of the scholarly work published. This increased international writing is a firm, long-term trend without any evidence of levelling off.

The efflorescence of publications depicted in Exhibit 8.2 has its counterpart in the emergence of specialty journals devoted exclusively to issues of marriage and the family.[3] Both basic and policy oriented research have found ready outlets in these journals. In the pre-World War II period of slow growth for family research, because of the near monopoly that sociologists had on the study of family phenomena, publications were predominantly in sociological journals. With the advent of specialty journals in the 1950s and the increasing salience of the family, journals of a wide range of disciplines opened their pages to discussion of family issues. By 1975-76, the number of journals publishing family research pieces had increased to 780. Exhibit 8.3 identifies the journals in 1975-76 that published 40 or more articles, roughly one-quarter the total output for the 2-year period.[4]

In sum, the consequence of the rapid growth of family scholarship has been the emergence of specialty publications and the diffusion of outlets among 100s of journals previously closed to scholarly discussions of marriage and the family.

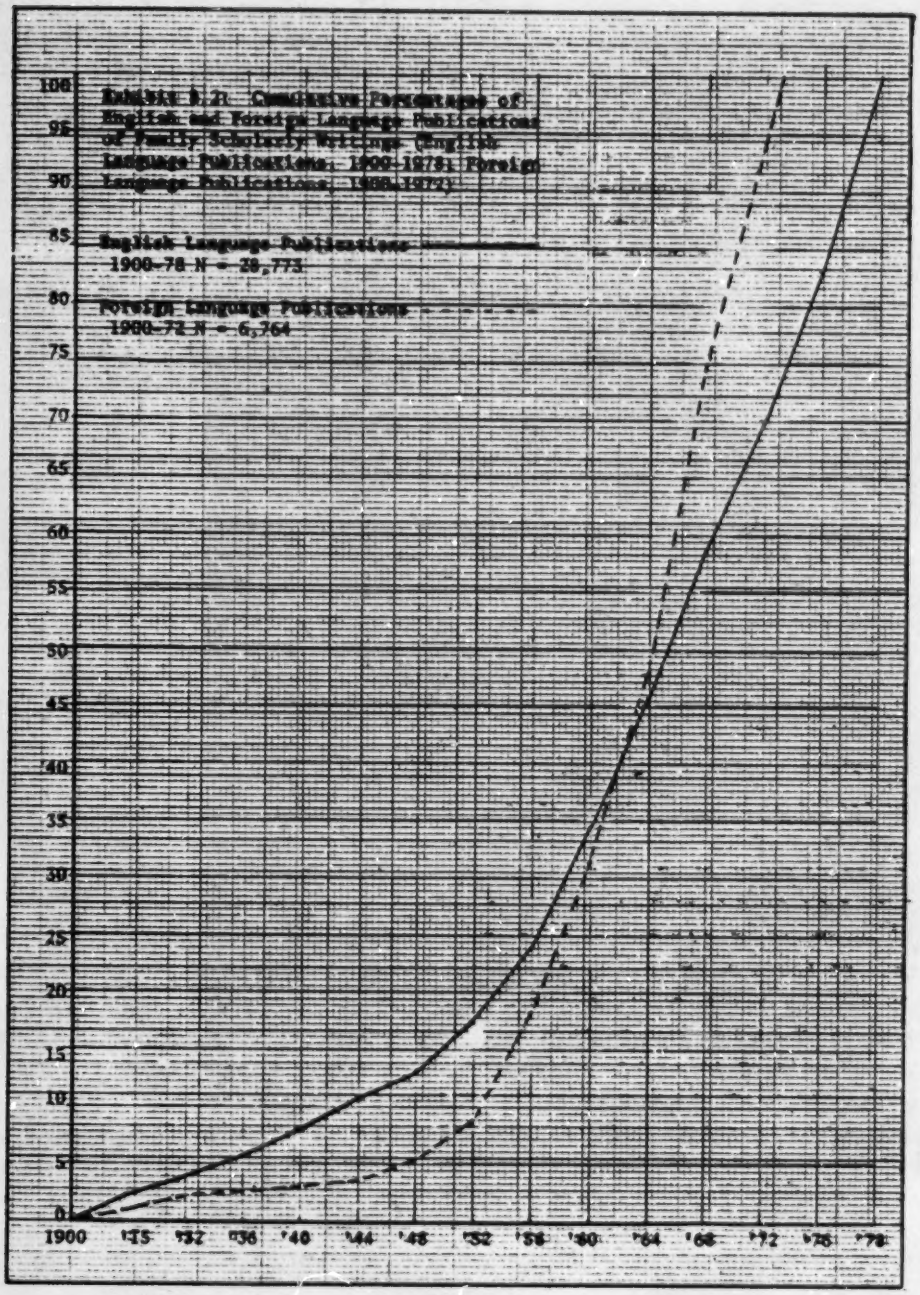


Exhibit D.R. Cumulative Percentage of English and Foreign Language Publications of Family Scholarly Writings (English Language Publications, 1900-1978; Foreign Language Publications, 1900-1976)
English Language Publications
1900-78 N = 28,773
Foreign Language Publications
1900-72 N = 6,764
100
95
90
85
80
75
70
65
60
55
50
45
40
35
30
25
20
15
10
5
0
1900
'15
'32
'36
'40
'44
'48
'52
'56
'60
'64
'68
'72
'76
'78

Exhibit 8.3

Journals Publishing 40 or More Articles in 1975-76 by Number and Percentage

		No.	%
1.	Journal of Marriage and the Family	165	3.9
2.	Family Coordinator	131	3.1
3.	Psychological Reports	84	2.0
4.	Journal of Marriage and Family Counseling	72	1.7
5.	American Journal of Orthopsychiatry	64	1.5
6.	Journal of Comparative Family Studies	64	1.5
7.	Family Process	60	1.4
8.	American Journal of Psychiatry	58	1.4
9.	Social Casework	48	1.1
10.	Population Studies	45	1.1
11.	Journal of Family Welfare	44	1.1
12.	Demography	43	1.0
13.	Adolescence	41	1.0
14.	Social Biology	41	1.0
15.	Family Planning Perspectives	40	1.0
	Total	1,000	23.8
	Articles Published in 765 Other Journals	3,188	76.2
	Grand Total	[illegible]	100.0

Source: Olson & Dahl (1977).

(2) Increasing Respectability.

So long as family scholars were content to describe and analyze ancient and exotic families, the issue of the propriety of family study was not raised. In the United States, the decade 1915-24 saw the first shifting from studies of the family's historical origins and evolution and descriptions of exotic families in preliterate societies to a concern for the problems of the contemporary family. The mores of the family were first questioned seriously during this decade as studies of sexuality, the status of women, and divorce flourished. It is perhaps no accident that the focus on the contemporary family emerged during a period of rapid change in the contexts of family life (Komarovsky & Waller, 1945).

The first studies of contemporary families were repugnant to the prevailing moral sentiments, since they were viewed as threatening to the "sanctity of the home." Studies of bereavement and studies of families in crisis were vulnerable to censorship and negative sanctions. As recently as the 1930s, researchers were being accused of "moral turpitude" and losing their jobs for studying courtship on the campus. It was in the decade of the

1950s that these areas became safe for protracted study. Today, tolerance is accorded to family scholars who study such sensitive issues as premarital sex behavior (Reiss, 1960, 1967); wife swapping (Gilmartin, 1978); and other forms of extramarital sex behavior (Reiss et al., 1980); studies of unwed mothers (Frank Furstenberg, 1976); and the research on honeymoon interactions (Rhona and Robert Rapoport, 1964), all of which just 30 years ago would have brought dismissal of researchers from their academic positions.

The issue of the propriety of directly studying the internal operations of the family may have been resolved within the academic community (including funding agencies) in the United States, but in Europe scholars until quite recently still preferred to study the family indirectly or incidently. Two reasons surfaced in Hill's survey (1958) for the failure of Europeans to study courtship, marriage, and the family centrally. First, since marriage was viewed as a religious sacrament, the church has regarded marriage and the family as covered by the principles of moral philosophy. Empirical family studies, therefore, were opposed as a competitive source of truth. Second, the family has become a controversial political issue with the organization of great national family unions that brought pressure for legislative action on behalf of their members. Reputable social scientists saw opposition from the family unions and the Church to anything they might publish, and accordingly, steered clear of the study of the family in Western Europe. European scholars also alleged that there was great resistance on the part of families to be studied, which persuaded some investigators that intimate relations within the family were inappropriate topics for empirical scrutiny. In the ensuing years, however, Europeans have joined Americans in making all aspects of the family subject to sober scientific inquiry. With the exception of some setbacks in the United States in black communities in the 1970s where leaders were asking for some quid pro quo for cooperating in family research, marriage and the family as an arena of investigation has, within the last generation, become safe for protracted study.[5]

(3) From Macroscopic to Microscopic Studies.

The focus of marriage and family research in the United States has changed dramatically since its inception at the turn of the century. The focus has shifted away from sweeping comparative analyses like G.E. Howard's *A History of Matrimonial Institutions* (1904) and similar large-scale macroscopic studies of ancient family customs. Present day work is giving more attention to the internal workings of marriages and families, and to the impact of family life on the personality development of children.

Dr. Ernest W. Burgess (1926) of the University of Chicago is credited with launching the movement to consider families as living associations as far back as 1926, but there was some time lag in following up on the implications of his formulations. It has taken time to persuade individual families to be studied, to emancipate scientists from strictures about the inviolability of the home as an arena of study, and to design research methods for collecting, analyzing, and interpreting the new family data.

Exhibit 8.4 presents an overview of the rise and fall of five major categories of family research over almost 8 decades. Since it has continued for more than 30 years,

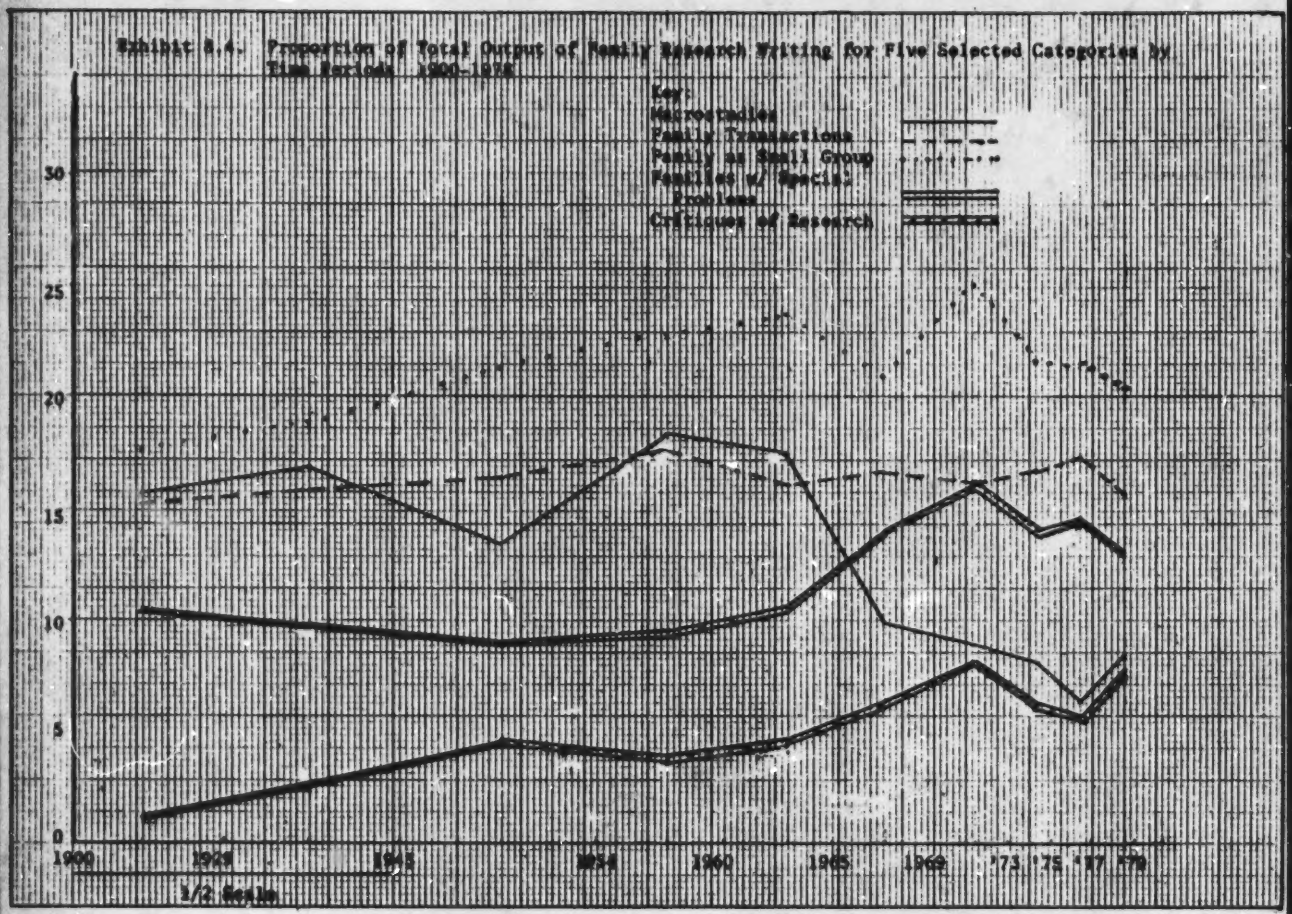


Exhibit 8.4. Proportion of Total Output of Family Research Writing for Five Selected Categories by Time Periods 1900-1978
Key:
Macrocracies
Family Transactions
Family as Small Group
Families w/ Special Problems
Critiques of Research
30
25
20
15
10
5
0
1900
1925
1945
1954
1960
1965
1969
'73
'75
'77
'79
1/2 Scale

Hill's (1955) assertion that there was a marked trend in focus of family research from macroscopic studies of marriage and family institutions to microscopic studies of the behaviors of contemporary families can now be confirmed as a long-term trend.

After holding their own during the period of slow growth in family research from 1900 to 1928, macrostudies dropped sharply in comparison with other categories, while microstudies have increased in proportion of publications over the depression and World War II periods.[6] Benefiting from the general postwar increase in family research, macrostudies increased in the 1950s but experienced a decline thereafter to the end of the 1970s.

Microscopic studies of the Family as a Small Group and of Family Transactions within the Community together have constituted the major foci of basic family research. The record also shows that beginning in the 1960s with government funding designated for research on the category of Families with Special Problems, there has been a dramatic increase in this kind of practical, policy oriented family research. It has not as yet eclipsed family research, however, on more theory-oriented issues. Exhibit 8.5 provides more detail on the various categories of research given attention over this period of time. Note that higher proportions of publications in the 1970s have addressed the concerns of the helping professions. Education for Marriage and Parenthood, Marriage and Family Counseling, and other programs of services to families have increased as targets for research, from 4% in 1965-72 to 11% in 1975-78. We might, therefore, phrase the second long-term trend as *a change in focus from macroscopic studies of institutional scope to microscopic studies of family interactions and family transactions, leading to programmatic studies of problem families and of services of family amelioration.*

(4) More Coordination of Research Efforts.

The great bulk of all family research in the first 40 years of this century was the product of single workers who carried out no more than one piece of research before turning to some other area of investigation. The emergence of titles of family sociologist and family specialist dates to the 1950s when the first scholars devoting full time to family research and training were appointed in American universities. Up to that point, work on the family was only one of many responsibilities in the teaching/research load of these scholars.

Hill's 1951 survey of family researchers showed that half of the research reported was undertaken by graduate students for doctoral theses, and two-thirds of all projects were financed independently by the researcher (Hill, 1955). There was, however, some evidence of collaborative work, with about one-third of projects multiauthored. Twenty-five years later, the Minnesota Inventory for 1973-78 recorded a step-up in the proportion of multiauthored articles to 45% covering more than 10,000 publications (see Olson & Dahl, 1975, 1977, and Olson, 1979). Insofar as multiauthorship indicates less solo and more team research, there would appear to be a movement toward cooperative research activity over the years covered by these reports. Moreover, multiple authorship of articles also reflects a trend toward multidisciplinary family research to which we will turn later in this report.

Exhibit 8.5

Proportion of Family Research References by Subject Matter Categories 1900-78

	1900-44	45-53	54-59	60-64	65-68	69-72	73-74	75-76	77-78	Total 1900-78 No.	%
Macroscopic Studies	17.2	13.7	18.6	16.4	9.9	9.2	8.3	6.4	8.6	4460	11.8
Family Transactions with Groups & Organizations	15.5	17.3	17.8	16.4	16.7	15.9	16.9	17.4	16.3	6276	16.6
Family as Small Group	17.7	21.4	23.2	23.9	22.3	25.3	22.0	21.7	20.4	8329	22.1
Mate Selection	3.1	3.7	2.7	3.0	2.1	2.3	1.6	1.4	1.6	855	2.3
Marriage & Divorce	14.4	12.2	10.8	8.0	5.9	6.3	4.0	3.8	5.1	2873	7.6
Family Reproduction Behavior	9.2	6.3	6.1	6.4	10.1	8.3	11.5	11.8	9.6	3337	8.8
Man & Sexual Behavior	2.8	2.2	1.7	2.0	3.1	2.4	3.5	3.2	4.6	1118	3.0
Families with Special Problems	10.3	9.2	9.6	11.0	13.8	16.2	13.9	14.5	13.0	4776	12.7
Minority Groups	4.1	3.0	2.7	3.2	3.2	3.0	4.2	3.0	2.8	1206	3.2
Surveys of Institutional Aids to Families	2.0	4.8	2.6	4.2	5.8	3.0	8.0	11.3	10.3	2230	5.9
Assessments of Family Research	2.2	4.7	3.7	4.5	6.3	7.7	6.1	5.5	7.7	2115	5.6
Other	1.5	1.5	0.5	0.6	0.7	0.4	0.0	0.0	0.0	176	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	37751	100.0
Total Number of Publications	2714	2525	3682	4939	4364	4494	3502	3099	3216		

Sources: Volumes I-V of the Minnesota Inventories; Aldous-Hill (1969); Aldous-Dahl (1974); Olson-Dahl (1975,1977); Olson (1979)

Better evidence of the trend to increasing collaboration among family scholars is the establishment of family research centers where long-range research planning and cumulative research programs could obtain external funding, enabling programs to be carried to term.[7] The first such research centers were established in the 1930s, but few survived. One of the most promising made its debut in 1951 at the University of Chicago as the result of the continuity of leadership provided by Ernest W. Burgess in marital prediction research. With Nelson Foote as director, this center lost no time in launching a research and experimental training program on interpersonal competencies in marriage and parent-child relations. Under-financed, the Chicago center lost most of its staff, including its director, by 1958. Revived in the early '60s as the Community and Family Study Center, the center's mission shifted to international family planning research and training.

As the sole survivor among the half dozen pioneer centers begun in the expansion period of family research at mid-century, the Minnesota Family Study Center, established in 1957 at the University of Minnesota with Reuben Hill as director, became the pace setter among research centers and continues in that role to the present time. The broad and ambitious objectives of the multidisciplinary Minnesota Center required a continuity of leadership and a minimum staff size.[8] Cumulative and coordinated research and training efforts under the aegis of the Minnesota Family Study Center have produced more than 50 PhDs in family sociology, and several distinctive research programs: Family response to acute and chronic stress; Family development and change (using three-generation designs); Family decision making and problem solving studies (using field and laboratory experiments); and Processes of dyadic involvement and marital conflict management. The theory building initiatives of the Minnesota Center have included the Minnesota Inventories and trend reports used in this report.

A second set of initiatives should be noted that were designed to bring about a more effective deployment of family research efforts at the national level. In 1950, the National Council on Family Relations, in cooperation with the University of Chicago, carried out a multidisciplinary workshop on family research to train researchers from 11 disciplines in a common terminology and methodology, stressing the family development and structure function approaches to family study. This 2-week workshop for family researchers had the effect of greatly increasing the salience of the Research Committee of the National Council on Family Relations where further attempts at coordination of research efforts have been continued (Hill, 1951). This same committee responded favorably to a proposal by two of its members to organize a series of annual workshops on family theory construction beginning in 1972 which have reached more than 100 scholars a year over the past 7 years (see David Klein, 1979, for an accounting of the achievements of these theory construction training workshops). A product of this consciousness raising about the importance of systematic theory building has been a 2-volume work edited by the organizers of the first workshops (Burr, Hill, Nye, and Reiss (Eds.). *Contemporary Theories About the Family, Volume I, Research Based Theories,* 1979; and *Volume II, General Family Theories,* 1980).

At the international level, the Committee on Family Research of the International Sociological Association has organized 16 international seminars on family research since 1954 successively, in all of the world regions. This initiative has been noteworthy in bringing about both the coordination of research efforts and the stimulation of improved

family research. The seminars have involved 7 to 10 days of discussion of methodology and findings from ongoing research on the family within the region serving as host for the seminar. The experience has been most stimulating for the participants and has made possible several cross-cultural collaborative studies (Mogey, 1971; Sussman & Cogswell, 1972).

Although this discussion of "more coordination of effort" began by noting that the bulk of family research is undertaken by solo entrepreneurs, the evidence indicates a trend *toward greater collaboration in the form of multidisciplinary teams, toward the establishment of research institutes and centers for programatic research, and toward coordination of research efforts both in the United States and internationally.*

(5) Documenting, Testing Hypotheses, and Cumulating Theory.

There is evidence that marriage and family researchers are showing greater awareness of previous work, are seeking to test hypotheses, are making explicit their use of theoretical orientations, and are beginning to cumulate generalizations into inductive theory.

Nye & Bayer (1963), covering a 15-year period, 1947-61, demonstrated an increasing disposition over this period to cite two or more previous researches pertinent to the research problem presented in roughly 500 articles surveyed for that period. Failure to cite any previous work dropped from 16% in the first 5 years to 8% (1957-61). In this latter period the most frequent number of mentions was 6 to 10 previous articles.

Nye & Bayer also confirmed Hill's (1958) earlier finding of an increasing disposition to test one or more hypotheses in the research reported. (See Exhibit 8.6.) Nye & Bayer showed a decline in the number of research articles failing to test hypotheses from 55% in 1947-51 to only 22% in 1957-61.

More substantial evidence that family scholars are utilizing theory in guiding their research derives from recent surveys by Klein and associates (1969) by Hodgson & Lewis (1979) and by Cerny et al. (1974) for Europe and Japan. Klein and associates developed a classificatory scheme to characterize the nature of the 600 articles surveyed from 1962-68: (1) Empirical: presentation of empirical findings; (2) Theoretical: presentation of abstract concepts; (3) Theoretical-Empirical: presentation of empirical findings as interpreted by some theoretical scheme; (4) Methodological: presentation of methodological tools or techniques intended mainly for use in the study of the family; (5) Discussion: nonempirical, nontheoretical presentation of ideas concerning marriage and the family; (6) Applied: articles oriented to the solving of family problems; (7) Other: other issues including trends in family research. Hodgson & Lewis employed the same classificatory system for the years 1969-1976, as have Cerny et al. (1974) for European and Japanese research, 1962-70. The findings from the three surveys appear in Exhibit 8.7.

From the evidence given in Exhibit 8.7, it would appear that American scholars are writing "Theoretical Essays" in modest numbers and that the frequency has stabilized. The proportion of publications of this kind remained between 5% and 6% for the period 1962-76. It is in the category of "Theoretical-Empirical" articles, where empirical find-

Exhibit 8.6

Extent of Hypothesis Testing in Family Research Publications Surveyed by Hill for Europe, Asia and U. S. (1945-56) and by Nye and Bayer for U. S. (1947-61)

Hill Survey of European-Asian and a 15% Sample of U. S. Research Publications

Are hypotheses tested?	Europe and Asia		N	United States		N
	1945-50 %	1951-56 %		1945-50 %	1951-56 %	
Yes	9.8	17.1	35	24.2	30.0	55
No	90.2	82.9	191	72.7	67.7	136
Unclassified	-	-	-	3.1	2.3	5
Total	100.0	100.0	226	100.0	100.0	196

Nye and Bayer Survey of U. S. Publications

	1947-51 %	1952-56 %	1957-61 %	N
Formal hypotheses	15.5	45.3	53.9	202
Implied hypotheses	29.6	25.8	24.6	118
None	54.9	28.9	21.6	136
Totals	100.0	100.0	100.0	456

Source: Hill (1958); Nye & Bayer (1963).

ings are interpreted through some theoretical scheme, that there appear to be major gains in the period covered by Hodgson & Lewis, 1969-76, as compared with the preceding 7-year period. Professionally oriented applied articles increase even more substantially while nontheoretical "empirical only" presentations decline. The survey by Cerny and Associates of European and Japanese articles also shows a dramatic increase in theory oriented empirical research presentations (34.5% of publications) as compared with the assessments, not entirely comparable, made by Hill (1958) for the immediate postwar period (10-15% testing hypotheses).

There is also a duplicate trend toward making explicit the use of distinctive conceptual frameworks as theoretical orientation by research scholars. Much of the credit for rendering the conceptual frameworks for family study salient goes to the Minnesota Inventory of Family Research in the late 1950s. The initial work of Hill, Katz, & Simpson (1957) in naming seven frameworks and their users was followed by a much more detailed specification by Hill & Hansen (1962) in which the chief conceptual properties and the basic underlying assumptions of five frameworks were provided in taxonomic tables. They had arrived at these frameworks from the content analysis of 100s of American publications going back in time to 1920. Three categories of concepts were specified in the taxonomic tables developed by Hill and Hansen: type of behavior treated, social space

Exhibit 8.7

Kinds of Family Articles in the United States 1962-76; in Europe and Japan 1962-70

	Klein et al. U. S.		Hodgson & Lewis U. S.		Cerny et al. Europe & Japan
	1962-65 %	1966-68 %	1969-72 %	1973-76 %	1962-70 %
Kinds of Articles					
Empirical only	49.2	58.9	23.6	19.2	26.1
Theoretical only	4.8	5.9	6.7	7.2	13.5
Theoretical-Empirical	17.2	13.3	26.2	28.0	34.5
Methodological	1.2	3.3	4.8	4.9	2.2
Discussion	20.6	15.9	18.4	10.9	19.5
Applied-Professional oriented	4.5	1.8	14.5	25.3	1.0
Other	2.4	1.5	5.8	4.3	2.8
Total	100.0	100.0	100.0	100.0	100.0
Number	330	270	310	304	318

Source: Adapted from Klein et al. (1969); Hodgson & Lewis (1979); and Cerny et al. (1974).

in which it occurred, and the dimension of social time. The frameworks identified were the institutional, the structure function, the symbolic interactional, the situational, and the family developmental. This basic classificatory work of conceptual frameworks for family study is credited by Broderick in his lead article in *A Decade of Family Research* (1971) with having "more than any other influence. . . .shaped the field of family theory in the decade of the '60s."

In making the requirement that, to be included, a framework must possess concepts for the description of the family, either as group or as institution, Hill and Hansen dropped from their original listing two essentially psychological orientations (psychoanalytic and learning theory approaches) and the household economics approach, widely used in the United States and Europe in levels of living and family management studies dealing with the resources of time, money, and energy. In surveys of the conceptual approaches utilized by American and European scholars, however, Mogey (1971); Klein et al. (1969); Hodgson & Lewis (1979); and Cerny et al. (1974) found it necessary to reintroduce some of these orientations rejected by Hill-Hansen and to include two additional conceptual frameworks that have developed since their codification was published.

Exhibit 8.8

Percentage of Articles Utilizing Specified Conceptual Frameworks in Europe, Asia, and the United States for Specified Periods 1957-76

	Mogey	Cerny et al.	Mogey	Klein et al.	Hodgson & Lewis	
	Europe-Asia	Japan	U. S.	U. S.	U. S.	
	1957-68	1962-70	1957-67	1962-68	1969-72	1973-76
	%	%	%	%	%	%
Conceptual Frameworks						
Anthropological	9.0	4.2	3.0	2.7	-	-
Structure-Function	30.0	24.5	13.0	24.5	19.0	28.1
Institutional	17.0	26.0	8.0	2.0	20.2	12.5
Interactional	13.0	22.9	38.0	27.3	37.0	12.5
Psychoanalytic	1.0	-	18.0	11.0	-	-
Situational-Ecological	16.0	7.3	9.0	-	4.7	8.3
Developmental	3.0	10.4	10.0	14.6	14.3	24.0
Economic	-	5.2	-	-	-	-
Historical	-	2.1	-	2.0	-	-
Systems	-	-	-	-	3.5	12.4
Exchange	-	-	-	-	6.9	2.0
Other Frameworks	-	1.0	-	16.4	-	-
Totals	100.0	100.0	100.0	100.0	100.0	100.0
N	1238	96	723	247	84	96

Sources: Mogey (1971); Cerny et al. (1974); Klein et al. (1969); and Hodgson & Lewis (1979).

Exhibit 8.8 presents the results of these surveys showing the conceptual frameworks utilized in Europe, Asia, and the United States for specified periods from 1957 to 1976.[9]

The oldest of the approaches is the Institutional Approach, and it is particularly appropriate for studying the interrelations of family and society over great sweeps of time and space. Utilized by scholars concerned with the evolution and development of family institutions in Western Civilization, it has been the favored approach used by the writers whose publications are classified as Macroscopic Institutional Studies of the Family in Exhibit 8.5, and continues to dominate the scholarly writings of many Japanese, German, and Dutch sociologists. Exhibit 8.8 tells us that the Institutional and Structure Function Approaches remain salient in Europe, in Japan, and in the United States, although the former had been thought by critics (Broderick, 1971) to be in eclipse.

The Structure Function Approach, which views the family as a social system, has been applied to the family profitably at several levels from broad macroanalysis to intensive microanalysis. Its versatility possibly accounts for its continued widespread use in the United States according to the three surveys covering the period 1957-76 shown in Exhibit 8.8.

The Interactional or Symbolic Interactionist Approach, first developed in sociology and social psychology, has been employed most frequently in the past 20 years in American family scholarship and has become accepted in Japanese scholarship as well (23% of the articles assessed by Kamiko in Cerny et al., 1974). It is especially appropriate for examining the internal dynamics of families as centers of interpersonal interactions and conflict.

A rising star among the conceptual frameworks is the Family Development Approach, which has the unique advantage of being able to cope with the time dimension over the life cycle of families from their formation to their dissolution. Exhibit 8.8 notes relatively little use of this framework in Europe in the '60s (3%), but, an adoption by 10% of Japanese scholars for 1962-70. The developmental framework more than doubles in the proportion utilizing it from the late '50s (10%) to 1973-76 (24%) in the United States. In a recent survey of 103 family theorists by David Klein, et al. (1977), the family development framework ranked third in a field of seven frameworks in "numbers using" and in "numbers identifying with," but highest in "needing further development." Two emergent frameworks, the Family Systems and Exchange Framework are fast achieving adherents, as witnessed by their gains in the 1969-76 period. Hill (1971) has noted the compatibility and overlap between the Systems' theoretical orientation and Family Development.

Accretion of findings into inductive theory. One of the definite advantages of utilizing theoretical orientations in the design of empirical research is that successive researches in the same domain can become cumulative in contributing to a body of interrelated propositions. In the United States, steady accretion has been occurring in work on assortative mating, with 100s of studies of homogamy, of residential propinquity, and more recently, of complementary needs in mate selection. (See the careful theoretical integration of the research and theory writing in the U.S. by Bert Adams, 1979, and Alain Girard for France in *Le Choix du Conjoint,* 1964.)

The initial work on factors making for marital success by Burgess & Cottrell (1939) and by Terman (1938) has been widely replicated in settings as diverse as China (1952), Sweden (1951) and Belgium (Piel, 1968). More than 150 different factors have been found to be significant in the 100s of studies of marital happiness, but few of these factors hold the same predictive power for more than four studies (Clayton, 1979). Among the more interesting findings that continue to have some utility are:

(1) Common interests and common friends
(2) Sociability, reflecting number of friends and social participation
(3) Conventionality in religion and politics
(4) Possessing a nonmaterialistic humanitarian philosophy
(5) Interest and desire for children
(6) Love based more on companionship than on romance
(7) Healthy attitudes toward sex
(8) Happiness of parents' marriage
(9) History of happiness in childhood

A second Burgess study was an unusual example of accretive work. It was the engagement study by Burgess & Wallin (1953), which was the first bona fide long-term

longitudinal study ever undertaken of marriage and family phenomena. Burgess scheduled a full-scale assessment of their adjustments while still engaged for 1,000 engaged couples and made arrangements to return for a second assessment 3 years after marriage. Still a third assessment was taken of the surviving couples 20 years later to capture the changes in levels of marital satisfaction and the factors that predicted them. The factors making for adjustment in engagement did predict adjustment in early marriage. The sources of marital conflict and the methods of resolving conflict also were foreshadowed by the patterns of conflict in the engagement. The pattern of engagement, however, had limited value in understanding marriage in the middle years. Indeed, the findings from this unique longitudinal study and many other studies of the middle years suggest that the bases of marital satisfaction change in the late childrearing years of marriage, with general disenchantment being the predominant pattern even for couples with high scores in early marriage (see Pineo, 1961; Rollins & Feldman, 1970; and for a general review and integration of research-based theories about marital quality and marital stability, see Lewis & Spanier, 1979).

Cumulative work is also occurring in the United States and Europe in studies of adjustments of families under stressful conditions. Critical reviews of this area of research activity (Hill, 1958; Hansen & Hill, 1964; and Burr, 1973) listed cumulative findings about kinds of stressor events, the factors making for crisis-proneness in families, and kinds of families that best survive stressful events. The works cited include Angell (1936), Cavan & Ranck (1938) and Elder (1974) on depression crises; Eliot and his students (1955) on war and peacetime bereavements; Koos (1946) on family troubles of everyday life; Jackson (1954) on family adjustments to alcoholism; Hill (1949) and McCubbin et al. (1976) on war separations and reunions; and Geiger (1955) and Schelsky (1956) on adjustments to deprivations of war and political terrorization. The theories generated by these researches have been further assessed against the findings from studies of family adjustments to natural disasters in the United States by Hill & Hansen (1960).

There may be some merit in listing the attributes of family organization, modes of adjustment, and factors making for adjustment that have grown out of the studies of families in crisis:

1. Factors Conducive to Good Adjustment to Crisis
   Family adaptability, family integration, affectional relations among family members, good marital adjustment, companionable parent-child relationships, family council type decision making, social participation of wife, and previous successful experience with crisis have all been confirmed as important factors in enabling families to adjust to crisis.
2. Generalizations about Families in Crisis
   a. Crisis-proneness, the tendency to define troubles as crises, is found disproportionately in families of low adequacy of organization.
   b. Family reactions to crisis divide between short-time immediate reactions and long-time adjustments.
   c. Demoralization following a crisis usually stems from incipient demoralization before the crisis.
   d. The length of time a family continues to be disorganized is inversely related to its adequacy of organization.

e. Unadaptable and unintegrated families are most likely to be unpredictable deviants in adjusting to crisis.
f. Foreknowledge and preparation for a critical event mitigates the hardships and improves the chances for recovery.

Some of the most careful work in seeking to build accretive theory about family phenomena has occurred with respect to family governance, the puzzling and multidimensional domain of family power and authority. Issues of measurement conceptualization have been addressed by Blood & Wolfe (1960) who have advanced a theory of comparative resources to replace the theory that power is allocated by gender in line with cultural definitions. Their research has been widely replicated within the United States and in several foreign countries: Belgium, France, Germany, Yugoslavia, Greece, Ghana, Puerto Rico, and Japan. Most American and European research findings are consistent with the conclusion of Blood and Wolfe that the power of the husband varies positively with his socioeconomic resources (income, education, occupational prestige, or a composite of these variables). There have been, however, a number of critiques of "resource theory" summarized by Rodman (1967, 1972) and by Burr (1973) that have resulted in a new model of marital power. A book-length monograph by Cromwell & Olson (1975) updated the research and theories. Besides defining power theoretically, Cromwell & Olson identified three aspects of family power: bases, processes, and outcomes. They saw the central issue to be one of validity in measurement that accounts, more than anything else, for the controversies that abound in this arena of activity in the United States. It goes without saying that problems of validity arise when the concepts utilized are not defined clearly and explicated. Cromwell & Olson have made a contribution in providing the basis for higher consensus about the meaning of power, a large step toward assuring higher validity in its measurement.

There has been, in sum, substantial movement over the past 2 decades, *toward theoretically oriented family research, pointing toward the accumulation of inductively derived theories.* The trend is no longer debatable.

(6) Increasing Attention to Scientific Method.

A sixth and final long-term trend may be seen in the increasing attention given to scientific method by family researchers in the processes of designing, executing, and analyzing research. We turn to the trend reports undertaken by Hill (1958) and Mogey (1971) for Europe, Asia, and the United States (1945-68); and to the several surveys of American family researchers by Nye & Bayer (1963), Ruano et al. (1969), and Hodgson & Lewis (1979) for assessments of these trends from 1947 to 1977.

We will ask a number of questions of these surveys which may, except for some time periods, be answered unevenly. To what extent did representative sampling methods permit the generalizing of results to a broader population? What kinds of data collection were used? What methods of data analysis and summarization of findings were employed?

In Exhibit 8.9, we have evidence of increasing sensitivity to the importance of representative samples, both for scholars in Europe and Asia and for the United States.

During the decade from 1957-68, a small but stable proportion of studies drew on the entire population (roughly 6%), and the principles of representative sampling appear attended to in approximately 25% of all studies, up from 6% in the United States in the immediate postwar period. But a substantial proportion of both foreign and American family scholars continued to ignore good sampling procedures. Foreign scholars tended to rely on documentary sources for their data; whereas, in the United States, it was the use of nonrepresentative samples of college students' families, welfare families, and clinical families that lowered the generalizability of research.

Exhibit 8.9

Populations Studied and Attention to Representativeness of Samples for Europe, Asia, and the United States 1945-68

Populations Studied	Europe and Asia 1945-50 %	Europe and Asia 1951-56 %	Europe and Asia 1957-68 %	United States 1945-50 %	United States 1951-56 %	United States 1957-67 %
Total Population (Census Records)	7.8	12.0	6.0	3.0	6.9	6.0
Representative Samples	13.7	11.1	20.0	6.1	10.0	24.0
Nonrepresentative Populations (Special strata such as college students' families, welfare families, clinical families)	35.3	35.9	29.0	66.6	60.7	38.0
Documentary, legal, literary, historical records of families	41.2	36.6	43.0	16.7	12.3	19.0
Unclassified	2.0	4.6	12.0	16.6	12.3	13.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Numbers of publications assessed	88	138	1262	96	100	723

Sources: Hill (1958) for Europe and Asia, and United States, 1945-76; Mogey (1971) for United States, 1957-67, and Europe and Asia, 1957-68.

Exhibit 8.10 taps three surveys of American scholars for the period 1947-76 to confirm, in general, the continuity of preference for interviews and questionnaires as methods of data collection. The family researcher more frequently collected data from respondents by interviews or by questionnaires prepared by the investigator, rather than relying upon official statistics collected by clerks or census enumerators as did most

demographers and economists. The United States has a substantial lead over Europe and Asia in this respect, although the trend there is also in the direction of increasing use of interviews and questionnaires. Europe and Asia are turning increasingly from literary, legal, and historical documents to the collection of empirical data (Hill, 1958, Table 4, p. 13).

The most recent period, 1973-76, however, shows a shift to the less expensive questionnaire and the reanalysis of family variables from secondary data sets, which may reflect the recent cutbacks in research funds from state and federal sources. The easy availability of underanalyzed family data from national surveys and public opinion polls is proving increasingly attractive to American family scholars unable to afford the expense of primary data collection from their depleted resources.

Exhibit 8.10

Methods of Data Collection Used in the United States at Specified Time Periods, 1947-76

Method	1947-51 %	1952-61 %	1962-68 %	1969-72 %	1973-76 %
Interview	11.3	20.8	21.0	32.0	18.4
Questionnaire and tests	40.9	42.3	33.6	40.5	32.6
Direct Observation	0.0	1.5	4.7	4.6	6.4
Secondary data	31.0	21.6	20.9	7.8	28.3
Combinations of above	12.0	10.4	16.6	15.0	14.9
Not classified	2.8	2.5	3.2	-	-
Total	100.0	100.0	100.0	100.0	100.0
Number of Publications	71	385	444	153	141

Sources: Nye & Bayer (1963) for 1947-61; Ruano et al. (1969) for 1962-68; Hodgson & Lewis (1979) for 1969-76.

Although all the elements of quality control in research are important, the most crucial are the methods used for data summarization and analysis. Exhibit 8.11 records a marked shift away from typologies (making use of causal inferences that are not supported by statistical tests) toward statistical analysis in all countries. In the United States, the shift is also from primary reliance on descriptive statistics to the addition of statistics of inference (inductive statistics involving tests of differences, measures of association, and expressions of probability). The percentage relying on "impressionistic summaries" 1957-67 from the Mogey (1971) survey is puzzling, running counter to the trends noted since Nye & Bayer (1963) further corroborate the trend report findings of increasing proportions of articles using tests of significance in presenting findings – increasing from 30% in 1947-51 to 47% in 1957-61.

Exhibit 8.11

Methods of Data Analysis and Summarization Employed in Researches of Europe and Asia, and in a 10% Sample of Publications in the United States, 1945-68

	Europe and Asia			United States		
	1945-50	1951-56	1957-68	1945-50	1951-56	1957-67
	%	%	%	%	%	%
Methods of Analysis						
Inductive statistics tests of significance of associations	2.0	11.4	8.0*	31.8	45.4	43.0
Descriptive Statistics, averages and percentages primarily	25.5	24.1	26.0	36.4	22.3	23.0
Typologies and paradigms	35.3	27.4	12.0	10.6	3.9	4.0
Impressionistic, unsystematic summaries	33.3	33.7	33.0	13.6	14.6	30.0
Not classified	3.9	3.4	21.0	7.6	13.8	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of publications assessed	88	138	1262	96	100	723

Sources: Hill (1958) and Mogey (1971).

*Mogey (1971, p. 32) suggested that "the drop from 11% in 1951-56 to 8% in 1957-68 could be due to sampling variability."

In Exhibits 8.9, 8.10, and 8.11, a view of methodological movement in family research, 1945-76, has been presented. With few exceptions, as noted, *the general direction has been toward greater sophistication in selection of populations to study and in methods of data collection and analysis.*

Emerging Tendencies in Family Research

There are a number of developments that emerge from the examination of the literature and the consultation undertaken for this report that are too new to be called trends, but nevertheless deserve attention as emergent directions in family research:

1. An increase in perspective taking reviews and assessments of research.
2. Increasing multidisciplinary research.
3. A breakthrough in family interaction process analysis.

4. The emergence of mesolevel studies of the family as the behaving unit in larger networks.
5. Extension of interest to a life span orientation in family development research.
6. Responsiveness to need for research on new lifestyles and on newly defined social problems.
7. Attention to research on family pluralism via ethnic family studies.
8. Increased legitimation of family policy oriented research.

Perspective Taking.

There has been a remarkable growth in stock taking and inventorying of family research, looking backward in order to project forward with greater confidence. In Exhibit 8.4, this is demonstrated graphically for the period 1900-78 in the increasing proportions of articles devoted to self-conscious assessments of the quality of the research enterprise. Perspective taking essays were not common in the first 4½ decades of family research, running to fewer than 60 for the entire 45-year period. By 1969-72, the volume of critical assessments of family research was running to almost 90 a year (350 for the 4-year period). The total output (1900-78) recorded in Exhibit 8.3 is 2,115 perspective taking essays on family research.[10]

Paralleling the increasing number of critical assessments of family research is a program of inventorying, both focused inventories on aspects of family research, and more ambitious inventories of research propositions covering the entire field of marriage and the family. Many of these propositions, upon examination, prove to be invalid, unreliable, or nongeneralizable because of faulty sampling and bad data collection methodology, or equally disheartening, to be theoretically uninteresting.

What is required to deal with this mass of uneven findings is a program of inventorying to analyze the content of published studies, specifying the research procedures employed, the conceptual frameworks used, and the substantive findings. Two major programs of inventorying leading to codification of propositions about marriage and the family have made major impacts on this knowledge building enterprise.

William J. Goode, in a major critique of family theory (see *Sociology Today*, 1959), noted that more research investigations had been reported on family phenomena than any other sociological domain, but few of these sought to advance theories about the family. He saw the empirical base adequate at this point to make three types of theoretical contributions: Type 1, deductions from general sociological theory to explain family behavior; Type 2, inductions from specific findings about family phenomena abstracted into theoretical statements of utility to general sociological theory; and Type 3, theories treating the family as a closed system. Goode saw Type 3 theory building as the direction in which the major efforts of American family scholars mistakenly had been directed. In an effort to rectify this deficit, Goode and his associates at Columbia University undertook an inventory of 1000s of propositions about marriage and the family from research investigations, essays, and anthropological field studies (*Social Systems and Family Patterns: A Propositional Inventory* [1971]).

Even more ambitious as an order-creating enterprise has been the work of Reuben Hill and associates at the University of North Carolina, 1953-57, and subsequently at the University of Minnesota, 1957 to the present, known as the Minnesota Inventory of Marriage and Family Research. The objectives of this inventory include (1) the identification of the empirical foci that have been investigated by marriage and family researchers; (2) the classification and summarization of the research findings among these foci; (3) the identification of the frames of reference that have been used as theoretical approaches by marriage and family researchers; (4) the isolation of the major conceptual apparatus of each of the frameworks that are identified; and (5) the theoretical organization, where possible, of research findings into sets of interrelated hypotheses and propositions.

The Minnesota Inventory of Family Research has also sponsored Murray Straus's inventorying of family measurement techniques, covering over 300 scales and tests developed to measure dimensions of marriage and the family, *Family Measurement Techniques* (1969, 1979).

The highest quality reviewing of research propositions and constructing of theory has been done on mate selection and family formation with a book-length publication by Winch (1958) and a psychological assessment by Tharp (1963), setting a high standard for subsequent writers. A later integration by Jacobsohn & Matheny (1962) is exemplary, reviewing over 250 publications and identifying 10 firm propositions about mate selection in closed marriage systems. These propositions form a chain whose links cumulatively relate socialization to role acquisition, role performance to family structure, familial relationships to kinship patterns, and kinship patterns to the social system as a whole. With equal care, the authors also have reviewed the research and provided the links for mate selection theory in open participant run systems, looking successively at the *referents* of mate selection, the *functions* of mate selection, and the *determinants* of mate selection. These latter are multifactorial, including demographic, statutory, socioeconomic, referent networks, and personal attribute-type factors.

Jacobsohn & Matheny concluded that, despite a wealth of information concerning the determinants of mate selection, the findings are, with notable exceptions, not cumulative, nor do they coalesce into a unitary theoretical framework. Three major conceptual foci encompass these determinants: (1) Simple Convergence, within which propinquity and homogamy theories fall; (2) Perception and Affect, within which the phenomenological theory of the congruity of Self and Other perceptions, empathy theory, and Newcomb's Theory of Interpersonal Attraction are found; and (3) Interaction Process.

Bolton's (1961) conceptualization of interaction process, developed explicitly for the study of mate selection, covers better than any other framework the chief miniature theories that have emerged to date (but see Adams, 1979). For example, it encompasses Waller's *summatory* process, Cavan's *winnowing* process, Kerckhoff's *filtering* factors, Heider's *balance* theory, and Newcomb's *principle of interpersonal attraction.* Mate selection was seen by Bolton as a "problematic process," that is, as an end product of a sequence of interactions characterized by advances and retreats along the paths of available alternatives. Interaction process analysis, because it emphasizes a relationship rather than the behavior of two individuals, can encompass numerous variables which hitherto have had to be studied in isolation. In Bolton's hands, it has yielded three modes of

interaction which, in combination, determine the sequence and course of a relationship: *episodes* of interaction, *forms* of interaction, and *turning points.* This procedure has also produced five distinct kinds of developmental interaction processes over the period of involvement leading to commitment to marry, suggesting the likelihood of multiple explanations for mate selection.

Selected, high quality reviews ending with higher order theoretical constructions may also be found with respect to age at marriage (Moss, 1965; Otto, 1979), unmarried parenthood (Furstenberg, 1976), family planning (Freedman, 1975), family problem solving (Klein & Hill, 1979) and family power (Cromwell & Olson, 1975; Scanzoni, 1979). Propositions of some sophistication about family transactions with kindred, neighbors, and collateral systems, stressing open and closed networks, also will qualify shortly as incipient middle range theories (Lee, 1979).[11] The assessments of family research in the decade of the 1960s covering 12 domains is a recent expression of peer assessment of the deficits, accomplishments, and promise of family research at the beginning of the 1970s (see Carlfred Broderick [Ed.]. *A Decade of Family Research,* 1971).

Each of the teams of scholars working in these domains has brought its own style of deriving propositions and of arranging them developmentally. Some have been more interested than others in moving beyond simple classifications of convergent findings to construct complex chain propositions and even inductive partial theories. But all have left their readers with a better grasp of the present state of theory in their arena of endeavor.

I regard these four perspective taking developments of comprehensive international bibliographies classified by topic and title, systematic research critiques, inventorying for research propositions, and codification of research into partial theories as definite hallmarks of maturity of contemporary family research.

Increasing Multidisciplinary Research on Marriage and Family Behavior.

A second emerging movement in family research is the increasing disposition to undertake multidisciplinary projects by research teams including professionals from different disciplines. This is taking place despite the lack of a fully acceptable multidisciplinary conceptual framework to integrate these efforts.

For example, a rapidly growing sector of family research in the United States is organized around the family as the appropriate unit of health (that is, for diagnosis and treatment of many illnesses), first given prominence by Henry B. Richardson's pioneer research, *Patients Have Families* (1945). He found aggravations in interpersonal relations within the family associated with ulcers, hypertension, congestive heart disease, dermatitis, and other somatic responses to intrapsychic conflict. In this area, medically trained researchers from different branches of medicine join with psychologists and sociologists to interrelate situational factors in the home and on the job, interpersonal processes within the family, emotional conflicts within the patient, and the medical symptoms of discomfort that bring the patient in for medical treatment.

Equally prominent is the study of the family as the primary unit responsible both for mental health and mental disorder. Here, family sociology, psychiatry, clinical

psychology, and social work often converge in multidisciplinary teams. Thanks to the funding support of the National Institute of Mental Health, the interests of these several disciplines have been legitimized and translated into concrete research projects. Under the general category of Families with Special Problems is a subcategory, Families of the Mentally Ill, which has increased in volume annually from roughly seven projects a year over the first 65 years of this century to 95 publications annually for the 8-year period 1966-72 (when research funds were available most readily). Activity in this area dropped to 80 publications a year during the 6 years from 1973 to 1978, when research funds for new projects in this domain were cut back drastically.

Multidisciplinary research on the impact of the family on mental health and personal adjustment of family members includes the effects of family patterns on the development of coping skills in children and their successful adjustment in school and community. A byproduct of much of this multidisciplinary work on the family as the unit of mental health is a view of much of childhood schizophrenia as a response to inequitable family power allocation and communication patterns of rejection, isolation, and scapegoating. Kohn & Clausen (1956) were ahead of their time in the rigor of the controls they used in attacking this tantalizing problem. They paid attention to the requirements of sampling, of experimental controls, and of specification in data analysis to examine the relationship between parental authority allocation and the development of schizophrenia in family members. They found the combination of wife and mother dominant with a subordinant husband-father significantly associated with schizophrenia, especially in male children.

Spiegel & Bell (1959), in a summary of research on the "Family of the Psychiatric Patient," have identified 207 studies of the phenomenon of family embedded mental disorders. They implicate family size, birth order, divorce and separation, and social class as correlates of mental disorder, but see more significance in the family processes of scapegoating, of double-bind type communications, of asymmetric power relations and faulty gender identification as more clearly etiological. In a more recent summary of family interaction research (Riskin & Faunce, 1972), it is clear that increasingly sophisticated methods are being used by researchers on these pathogenic processes in families. They have innovated research designs using normal nondiagnosed families as "controls" and are classifying family interaction patterns observed in the laboratory for these two classes of families. They now propose longitudinal studies of high risk families where no disorder has yet appeared, to ascertain if the "double-bind" type communication processes found in diagnosed families appear antecedent to the disordered symptoms in the child, or may be a consequence of the disruption of the family's interaction patterns by the troubled member. Lennard & Bernstein (1969) further reported on the emergence in the course of treatment of new therapeutic dyads as a response to the intrusive psychiatrist. They reported that the boundaries of dyadic coalitions are less permeable in schizophrenic families, making third party intrusions more difficult to undertake whether the person "closed out" be the sick child or the father. In general, Lennard & Bernstein found greater rigidity in sequences of interaction in clinically diagnosed families. (An illuminating codification, vintage 1978, of these several researches was Broderick & Pulliam-Krager, 1979.)

The Committee on the Family for the Group for the Advancement of Psychiatry has been in the forefront of this cross-disciplinary activity. The reports of the Committee

encouraged psychiatrists to turn away from personological labels in order to attend to the interpersonal processes of family interaction as early as the 1950s, questioning the usefulness of psychiatric terminology for family diagnosis (see Spiegel & Kluckhohn, 1954). They recommended shifting for diagnosis and intervention procedures to a frame of reference that utilizes a felicitous combination of communication and role, as well as family interaction and transaction concepts. Assessing the subsequent research on the utility of communication concepts for these purposes was done perceptively in the review, "Communication in Couples and Families" by Rausch et al. (1979).

A particularly interesting set of studies involving several disciplines grew out of an attempt to discover the consequences of counseling, casework, and psychotherapy for clients and their families. (See references in Beck & Jones, 1974.) Therapists, psychological researchers, and family sociologists join together with some travail and miscommunication on these problems, but they are becoming more compatible with time. In the years that family and psychiatric agencies services have been wrestling with the consequences of their services for families, a new professional has arisen, the practitioner-researcher, who feels at home in the setting of therapeutic services, able simultaneously to understand the problems of the therapist and the importance of rigorous research designs.

Cracking the Family Nucleus through Interaction Process Analysis.

A third emergence, which we must recognize as a major breakthrough, is what might be called the "cracking of the family nucleus" through interaction process analysis. The proposal to study the family as a unity of interacting personalities is not new – it dates to Burgess's classic paper of 1926 – but appropriate methods for doing it have been developed only recently. Biographical materials, literary descriptions, and retrospective analyses from interviews with informants were employed for many years, but these methods elude the episodes of action that characterize families.

Both conceptual developments permitting the elusive concepts of symbolic interaction to be operationalized and new methods of data collection were required to make this breakthrough. It may be presumptious of us to identify the major contributors, but surely the history of this "cracking of the family nucleus" will note the work of Dymond (1953, 1954) on empathy; of Manford Kuhn (1954, 1964) and his studies of self-attitudes; of Bales (1950) and Strodtbeck (1951) on interaction process analysis in small groups; of Nelson Foote (1955) and his associates on the development of interpersonal competence in quasifamily groups; of Don Jackson, Jay Haley, and others of the Mental Research Institute on families as rule bound systems of interaction (see Riskin & Faunce, 1972); of Bernard Farber (1956) with his work on families as contingencies of mutual careers; and of Eleanore Luckey (1961) using the Leary Interpersonal Check List to harness Self-Other perceptions.

Among the innovations facilitating this breakthrough in studying the nuclear family of procreation are new methods of direct observation in laboratory settings using Bales's (1950) techniques; of role playing type interviews for field studies developed by Stanton, Back & Litwak (1956); of participant experimentation developed by Foote (1955); of "family apperceptive tests" designed to elicit family themes and to catch family patterns

projectively by Hess & Handel (1959); and finally of simulation games provoking family problem solving and coping behaviors, notably SIMFAM (Simulated Family Activity Measurement) and SIMCAR (Simulated Careers) developed at the Minnesota Family Study Center by Straus & Tallman (1971, 1974).

Marital and family communication studies, studies of role taking and of its counterpart insensitivity to others, and studies of marital consensus and dissensus have flourished as a consequence of the work in interaction process analysis. The phenomena of adjustment in marriage and of prognosis for marital success have been transformed conceptually by these studies from multitrait correlates of spouses and backgrounds of spouses with their levels of marital adjustment into the interaction processes of *adjusting* between spouses (Bernard, 1964). That is, the change has been from personological correlates to the properties of dyadic relations, alignments, and commitments within the marital nucleus. Studies reflecting this emphasis include Laing, Phillipson & Lee (1966) on interpersonal perceptions; Hess & Handel (1959) on emotional alignments and family constellations; Lyle E. Larson (1975) on interpersonal perceptions of marital roles; and Miller et al. (1975) on marital communication processes.

Marital conflict and its management and marital decision making have been increasingly informed by the knowledge that has accrued from studies of the phasing of group problem solving, the distinctions made between problem definitions, choosing among alternative solutions, and securing support and acceptance of preferred solutions (Klein & Hill, 1979).

Beyond the payoffs for the maintenance of healthier marriages, the basic research on interaction processes has facilitated the study of the internal functioning and governance of families in everyday life. New methods of direct observation have been developed simultaneously with the willingness of families to open their homes to investigators 24 hours a day for 10 days at a time, at play, at work, and at rest. New descriptive patterns have been recorded in these settings about the ways families cope with the scarce resources of space, time, and energy in achieving family objectives (see especially the work by Kantor & Lehr, 1975). Other families have come to research laboratories to participate in game simulations of choice making, planning, and puzzle solutions (Straus & Tallman, 1971, 1974; and Reiss, 1971).

At the risk of oversimplifying the very complex and untidy processes families experience in the sequences of solving everyday problems, I will presume to cite a selected few of the patterns identified from an 80-page review by Klein & Hill (1979) to illustrate the payoffs of this genre of research. The most effective families in problem solving at home and in the laboratory appear to display a number of common patterns:

1. Communication channels are open among all positions.
2. There is high consensus on role expectations, goals and criteria for evaluating problems and problem solving performances.
3. Family members are attracted to each other and are mutually supportive.
4. The family is relatively homogeneous with respect to problem solving among members (making age compositions during the childbearing and childrearing periods less competent problem solvers).
5. The family is flexible developmentally; i.e., is able to alter its interaction patterns in response to changing characteristics of its members. (Large families and families

with unusual birth intervals tend to be handicapped in developmental flexibility.)

6. The family pursues a sequencing of interaction in problem solutions that gives opportunity for all members to contribute to the definition of the problem, the choice of a solution, and the acceptance of responsibility to carry out the plan of action chosen.
7. The allocation of power and support among members is legitimized to sustain leadership in decision making and action taking.

Reemphasis on Family Transactions within Social Networks.

A fourth emergence in American family research is the rash of studies of family transactions with significant external entities: with social networks of kinsmen, friends, workmates, and neighbors; with the workplace, with the market, and with the bureaucracies of health services, welfare services, schools and churches. Unburdened by data, Louis Wirth (1938) and Talcott Parsons (1943, 1949) speculated that urban middle class families would be isolated and anonymous units in America, shorn of kinsmen and supporting networks. Parsons challenged family scholars even further by asserting that this isolation was functional. As he reasoned, nuclear family units that are insulated from the workplace and without nepotistic supports in social placement probably fit best the requirements of our achievement oriented occupational and democratic political structure since the work structure requires social and spatial mobility of family units. Moreover, according to Parsons, a goal of the democratic political structure is to equalize opportunities for all. The minimization of intergenerational transmission of social and economic advantages is furthered by such isolation. In the debates that ensued, Parsons retreated to a cultural perspective comparing the American kinship system with kinship in other societies in which the nuclear families in such settings are substantially more enmeshed in extended family obligations than are American families.

Virtually none of the studies stimulated by the easy "sociology by assertion" type propositions of Wirth and Parsons, however, have confirmed the alleged isolation and insulation of American families from their supporting networks. Reports showing the viability of kin relations in modern societies, and the ways in which kin function to solve various individual and social problems, included work by Sussman (1953) and Litwak (1960), provocatively summarized by Sussman & Burchinal (1962a, 1962b). In Great Britain in the 1950s, Mogey (1956); Firth & Associates (1957); Elizabeth Bott (1957); and Young & Willmott (1957) came to similar conclusions. Garique (1965) in Montreal; Sussman & Slater (1963) in New Haven and Cleveland; and Litwak (1960) with Buffalo data, all demonstrated the tremendous aids in money, goods, services, and counsel nuclear family members received from parents and relatives. Visiting patterns among Detroit families (Axelrod, 1956; Blood & Wolfe, 1960); in Minneapolis (Hill, 1970); and in Boston (Reiss, 1962) all pointed to immediate kinsmen as the most significant reference groups of the nuclear families' network. A study designed to replicate the descriptive findings of most of these studies and to test emerging theories of explanation was com-

pleted at Greensboro, North Carolina by Bert N. Adams (1968). Adams (1971) and Troll (1971) have provided superb research reviews integrating the research undertaken in the 1960s on American kinship and intergenerational relations.

Clayton (1979) provided an exegesis of Adams's classic study. Adams conceptualized nuclear families in America as embedded in a social network of immediate kindred, friends, neighbors, workmates and fellow members of voluntary associations. He made comparisons directly of the relative attractions and of felt obligations for parents and siblings on the one hand; with friends, on the other. Adams was anticipating in this analysis the work in Hungary and the U.S. by Litwak & Szelenyi (1969) who discovered the differences in services families would expect from kin, neighbors, and friends.

Adams found interaction with parents frequent and pervasive, with females much more involved with their relatives than males. He found a strong affection for parents that was a mixture both of value consensus and of genuine positive concern for their parents. The mother-daughter tie was especially strong because the daughter's role had converged with that of her mother. She now understands and empathizes with the sacrifices made by her mother earlier.

In a separate analysis Adams (1967) compared expressions of affectional closeness, value consensus, and feelings of obligation toward best friend, parents, and the near-age sibling. His respondents saw themselves affectionately closer to their best friends than to their near-age sibling, and higher in value consensus to them than to either their parents or the near-age sibling. Yet fewer than a third felt any sense of *obligation* as a motive for maintaining contacts with *friends* compared with almost three-fourths for parents and three-fifths for siblings. Adams thought two forces were at work to explain interaction contacts with kin and friend. He grouped together interest, perception of need, and affection as "positive concern," which are basic to family cohesion, but saw a sense of "value consensus" as the basis for choosing and maintaining contact with friends. From the delineation of these two forces Adams developed five propositions:

1. *Consensus* is likely to be modal in friendship relations, and *concern* in kinship relations.
2. In general, interaction is likely to be desired with friends in preference to kin, because of the consensual component of friendship and the absence of strong obligatory feelings toward friends.
3. Positive concern is more likely to lead to persistence of a relationship than is consensus.
4. The relationship based upon positive concern is more likely than the consensual relationship to have as an element intimate communication.
5. The consensual and concern components among social relations demonstrate a substantial overlap among the various structural categories of individuals frequently considered as givens in descriptive interactional studies.

Second only to the kinship network in its intrusiveness on the nuclear family is the work system in America. Kanter (1977) has offered a penetrating integration and review of the research on work and the family in the United States which challenges the Parsonian view of the isolation of work from family structures. Indeed, the "absorptiveness" of the job at the expense of fulfilling within-family obligations is a major source of role strain and chronic stress. The mechanism of distancing and insulation of the two struc-

tures merely complicates matters (for other statements of work and family linkages see Mortimer, 1979; Moen, 1977; and Pleck, 1977).

The examples given above have been selective but probably are sufficient to suggest that "a point of no return" has been reached by family researchers in America. They must transcend the largely internal oriented focus on the family as a small group association, for which symbolic interaction has provided such an indispensable orientation, and recognize the transactional phenomenon of families in daily exchanges with their environments as the new research frontier. The transactional view reconceptualizes the family as a selectively opening and closing system, engaging in exchanges with a wide variety of collateral systems. Many families experience tension because of the inequities of the asymmetrical relationship with occupational and other more powerful systems. Studies at this "meso" level of behavior will have large policy implications and will be a precious source of data for the newly emerging studies of family impact analysis.

Changing Emphasis to Later Stages of Family Development.

Still another new development in family research is the shift in interest, particularly in the United States, from the early stages of family development – namely, courtship, marriage, and early parenthood – to the later stages of the family life cycle. America, as contrasted with Europe and Asia, was until recently much more concerned with the first stages of family formation – namely, the problems of getting started in marriage and early parenthood, than with the family in the middle and later years. Certainly, texts and manual writing were directed exclusively toward these young adult age groups before World War II. In the postwar period, studies of postparental roles (Deutscher, 1959; Saunders, 1974), of the relationship of married offspring and parents (Stryker, 1955; Sussman, 1965), and of grandparent roles (Apple, 1956; Neugarten & Weinstein, 1964) have been frequent. Studies of the aging family, both of the adjustments to retirement and to marital relationships, have become a growth industry with a 3-volume work summarizing that research, *Aging and Society* (see Riley et al. [Eds.], 1968). A theory of disengagement to account for the phenomena of isolation and withdrawal among aged couples by Cuming and Henry (1961) has stimulated a series of researches to corroborate or refute this antiactivity theory (see Hochschild, 1975 for a rigorous review of this research and the present status of the theory).

Viewing families as interlinked kinship units in three generation depth now permits the assessment of intergenerational continuity and change in family practices. It also offers opportunities to examine family life at different stages of development and assess cohort-specific influences unique to each generation (see research by Hill, 1970; Bengston & Black, 1973; and Elder, 1974). Utilizing the family development perspective, phenomena such as marital satisfaction, parental satisfaction, social participation, economic acquisitions, and crisis vulnerability have been traced over the entire life span to reveal curvilinear patterns. These phenomena appear to rise and then fall with the increasing complexity of family organization caused by changing numbers and age composition,

reaching the nadir point of satisfaction and achievement in the period when school age and adolescent children are still present in the home, then recovering with the launching of children into homes of their own. (See analyses by Hill, 1970; Miller, 1976; Rollins & Feldman, 1970; Spanier, 1975; Blood & Wolfe, 1960; Aldous & Hill, 1969; and Rapoport & Rapoport, 1975.)

Aldous & Hill (1969) have converted the findings of several studies showing variability of family performances over the life span into Vulnerability to Stress scores for three dimensions: (1) Deficits in Expressive Resources (including degree of marital dissatisfaction, dissatisfaction with love, companionship and marital communication, failure to share problems with husband, husband's alienation from home tasks, and degree of gender segregation of family roles); (2) Insufficiency of Instrumental Resources (including insufficiency of income, family size, inadequacy of housing, medical expenses, debts, job changes, and inability of wife to work gainfully); and (3) Dissatisfaction with Instrumental Resources (including dissatisfaction with level of living, with job, disagreements over money, and worry about financial costs of children). Exhibit 8.12 has been constructed to display the variation in Stress Scores from these three sources by seven stages of the family life cycle. The three dimensions of vulnerability tend to rise and fall together with maximum total vulnerability peaking in the years when families are rearing school age children and adolescents. Greatest dissatisfaction with the expressive resources of love, companionship, and sharing in the marriage continues to increase into the launching period and only makes a recovery after the children have left the nest. Viewed over the entire life span, it is the early years before the arrival of children and after their departure when there is enough discretionary income, and a large enough fund of good will and satisfaction with life, to give the defense in depth all families would wish to have to cope with the exigencies of life.

The issue of timing of educational and therapeutic services at critical points is suggested by these research findings about the changes in marriage and parental relationships over the family's total life span.

Couples are never more vulnerable to divorce and separation than in the first 3 years of marriage. Paradoxically, of those couples who remain married, the happiest and most congenial years are the vulnerable first years before children come. Husbands experience more disillusionment from engagement to marriage, and from honeymoon to the coming of children; whereas, wives report more disenchantment with love and companionship from the coming of the children until they grow up and leave the home. Troubles with in-laws peak in the early years but improve over time; whereas, marital differences about money and children increase until the children are launched. The postparental period, in contrast to the late childrearing years, appears to be companionable and satisfying, especially to mothers who are active in community affairs or who are gainfully employed.

From the several researches that have examined marriage and parenthood over several stages of development, it is hard to identify any common core of competences and abilities that persist. It is as if success in marriage and family functioning require different capacities and interests at different points in the family life span, suggesting a marked need for programs of adult socialization to prepare families for the changes in marital and parental roles of the middle and late adult years of family life.

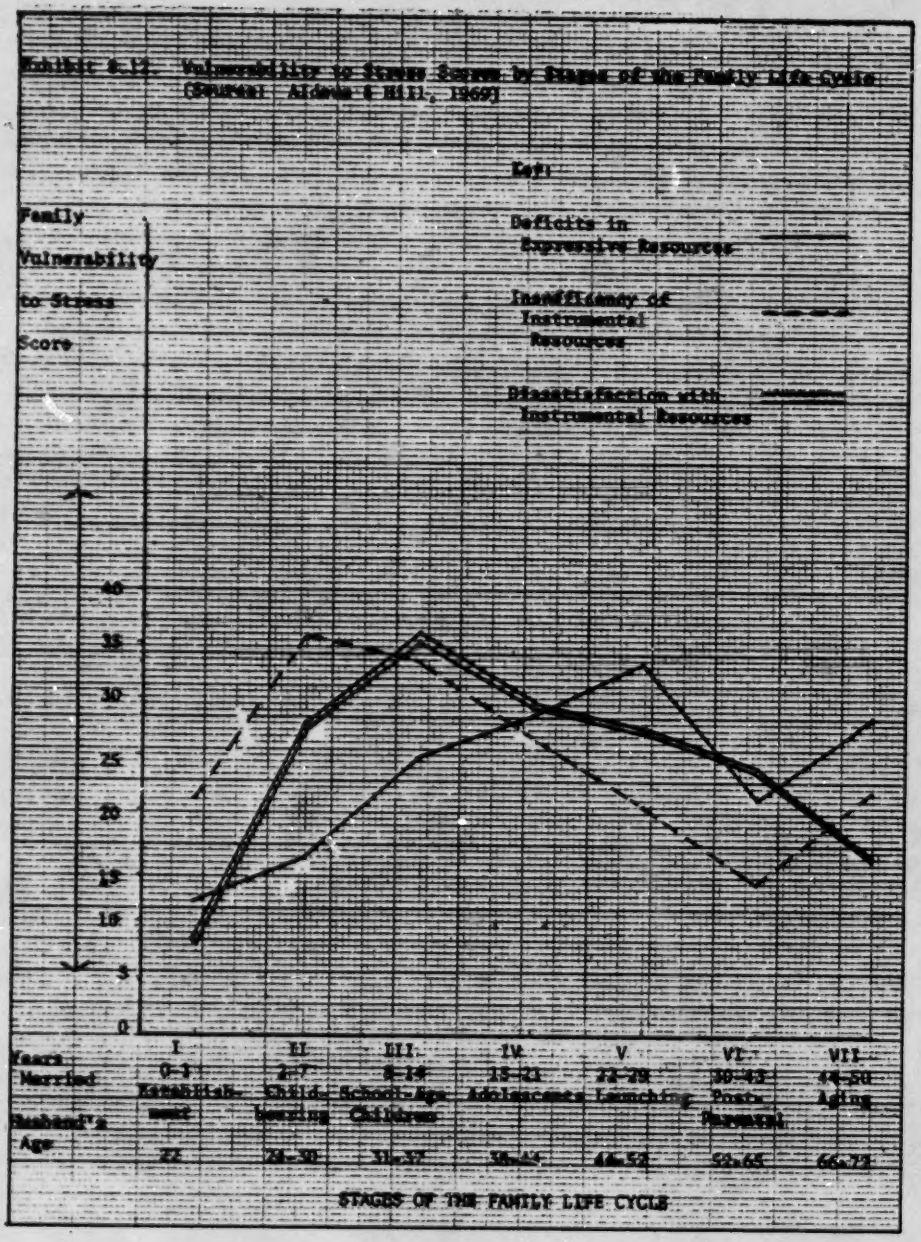


Exhibit 8-12. Vulnerability to Stress Scores by Stages of the Family Life Cycle
(Source: Aldous & Hill, 1969)
Key:
Deficits in Expressive Resources
Insufficiency of Instrumental Resources
Dissatisfaction with Instrumental Resources
Family Vulnerability to Stress Score
40
35
30
25
20
15
10
5
0
I
II
III
IV
V
VI
VII
Years Married
0-1
2-7
8-13
13-21
22-28
29-43
44-50
Husband's Age
22
28-30
31-37
38-45
46-52
53-65
66-72
Establishment
Childbearing
School-Age Children
Adolescence
Launching
Post-Parental
Aging
STAGES OF THE FAMILY LIFE CYCLE

Increase in Responsiveness of Family Research to Newly Defined Social Problems.

In an earlier discussion of the topical emphases represented graphically in Exhibit 8.4, the increase in research attention to Families with Special Problems during the 1960s was noted.

The '60s also brought challenges to families in making available optional lifestyles of cohabitation without marriage, of childlessness within marriage, of effective methods of control of family size (the contraceptive pill and sterilization) and the legalization of therapeutic abortions. Indeed, the term "alternate lifestyles" to stand for new and not so new family forms has now become part of the vocabulary, not only of social scientists but also of the general public. Parents without partners (including fathers), remarriages, and reconstituted families have achieved national visibility along with dual worker and dual career families as alternate paths for traversing the family life cycle. Family scholars have been responsive to these developments. Research publications were sufficiently high on many of these issues to require the establishment of new topical categories for the Minnesota Inventory volumes published in the mid-1970s. Exhibit 8.13 documents the increasing attention given to these emergent issues. Increases in research attention appear clear for all issues identified as new categories. Only Childlessness and Dual Career Families appear to be studied modestly by the late 1970s; whereas, the annual output in the first 6 decades was negligible for all of these new issues except sexuality, birth control, and family economics.

The responsiveness of family scholars to many of the issues of alleged family change has undoubtedly been rewarded by the availability of research funds from one or more federal agencies concerned with these pervasive problems; e.g., population related issues of birth control practices, abortion, and possibly childlessness (Mattessich, 1979), and the new problems of widespread divorce,[12] single parents,[13] child abuse, and family violence.[14]

The rise in attention to father-child relations in Exhibit 8.13 may reflect, in contrast, more of an intellectual trend in the family and child development community of scholars away from the correlating of traits of parents and children to the study of family interactions, thereby rediscovering the father as a significant parent (Hartup, 1979).

Attention to the Pluralism of Family Patterns in the United States.

Family research has recognized the obsolescence of the theory of ethnic assimilation (the melting pot theory) to make way for a view of American society as a conglomerate of "unmeltable ethnics" existing in a somewhat tenuous pluralism. An examination of the attention given to the diversity of American family patterns over the decades covered by this report offers a test of the degree of sensitivity of family scholars to the newly emerging pride of families in their ethnic origins.

Family researchers have been attentive unevenly to the diversity of American family patterns. Indeed, most of the propositions inventoried by the Minnesota program are

Exhibit 8.13

Frequency of Publications Per Year on Emergent Family Issues
1900-64 vs. 1965-72 and 1973-78

New Issues Added to Inventory in the 1970s	1900-64 No. per year	1965-72 No. per year	1973-78 No. per year
Premarital, Marital, and Extramarital Sexual Behaviors	5.00	31.0	89.0
Alternate Lifestyles	0.03	5.0	31.0
Childlessness	0.10	2.0	5.5
Birth Control Practices	5.00	61.0	98.0
Abortion	0.15	20.0	52.0
Families with Special Problems			
Divorce and Separation	2.80	32.0	47.0
Single Parent Families	0.44	6.6	18.5
Father-child Relations	1.40	25.0	38.0
Child Abuse	0.03	4.5	32.0
Family Violence	0.00	2.0	10.0
Family, Work, and Economy	9.30	113.0	116.0
Work and the Family	-	-	71.0
Dual Career Families			3.5

Source: Volumes I-V, Minnesota Inventory of Marriage and Family Research, 1900-78.

limited provincially to white, urban, middle class families within not more than one community. Specification of variation by social class (utilizing occupation, income, and educational level) has been most common because that is a possible intracommunity specification where only one community is studied. Regional specification, except for nationwide studies, has been rare and ethnic differentiations are only occasionally made.

Ruth Cavan in *The American Family* (1963) attempted to meet the challenge to pull together findings about the degree of pluralism of American family patterns, practices and objectives by major regions, major social classes, and the several ethnic configurations of the country, drawing on work by Allison Davis, Havighurst, Hollingshead, Koos, Munch, Peck, and Warner to achieve her synthesis. More recently, Mindel & Habenstein have edited *Ethnic Families in America: Patterns and Variations* (1976), integrating the research writing on the family patterns of 15 ethnic communities that persist as distinctive variants in the United States today. Their work provides modest support for the theory of "unmeltable ethnics" maintaining their identities.

Viktor Gecas (1979) has brought up-to-date the controversial literature on the impact of differential socialization beliefs and practices on children by social class in a theoretical integration, which shows that the impacts of social class on parent-child interaction are mediated by class related economic constraints and deprivations of the

work setting, as well as by the values of self-direction and conformity, and the relative flexibility of family structure. (Regional and ethnic variables are left residual in the Geca tour de force.)

What effects may have been registered on the priorities of research problems requiring attention by the intellectual ferment of the 1960s, by the civil disturbances and the strides taken in civil rights including the legitimizing of a stance of militance by the impoverished minorities? In Exhibit 8.5, the proportion of research output, 1900-78, devoted to minority groups is modest but steady, running between 3% and 4% of publications for the entire 80 years covered by the inventory.

Exhibit 8.14

Publications About Minority Group Families
1900-1978

	1900-64 %	1965-72 %	1973-76 %	1977-78 %	Total 1900-78
American Indian	7.5	2.4	3.6	8.2	27
Black American	63.0	76.0	73.5	61.2	376
Chinese American	7.0	0.8	1.5	2.0	14
Japanese American	7.0	0.8	4.0	3.0	21
Jewish American	11.0	12.0	2.0	9.2	41
Mexican American	3.0	5.5	15.3	14.3	55
Puerto Rican	1.5	2.4	0.0	2.0	7
Total percent	100.0	100.0	100.0	100.0	
Total Number of Publications	121	126	196	98	541
No. of Publications Annually	2	17	49	49	

Source: Volumes I-V, Minnesota Inventory of Marriage and Family Research, 1900-78.

Breaking down the publications of the minority group category in Exhibit 8.5 into those treating specific minority groups over the same period of time, we see (Exhibit 8.14) a more differentiated picture, one that makes some minority groups more visible than others during particular historical periods. The most striking impression in examining the work on minority group families, however, is the paucity of research devoted to the phenomenon of their distinctive ethnic patterns. For the first 60 years, two publications annually was the quantity noted in the Minnesota Inventory for the most visible minorities, and after over 8 decades we show only a token dozen studies of Chinese American families and barely double that for American Indians and Japanese Americans.

Special minority and ethnic oriented research has been helped by federal funding policies just as we indicated earlier that research on families with special problems was facilitated by such funds. Quantitatively, publications increased dramatically in the

1970s, but as we will show below, were unevenly distributed among the ethnic communities studied.

Publications about Black American families outnumber all other minority families in quantity of research, ranging from 63% in the first decades to roughly 75% in the late '60s and early '70s when "Black Power" and "Black Consciousness" was at its height. Reviews of the research on black families over the same historical periods by Robert Staples (1971) and by Walter R. Allen (1978) suggested major changes in emphasis, in ideological perspectives taken, and in conclusions about the viability of black family structures.

Chinese American and Japanese American families were subject to visible research attention earlier in the 20th century but have largely disappeared as research subjects since 1965. Jewish families continue to hold the interest of American scholars, particularly of Jewish researchers who have made major contributions to our understanding of Jewish family solidarity, intergenerational exchanges, and extended family kinship patterns. They also note wide variations in family patterns within the Jewish American ethnic community ascribable to national origins, the timing of migration, and the social makeup of the various sectors of the Jewish American community (Farber et al. in Mindel & Habenstein [Eds.], 1976).

The chief beneficiaries of the salience of minority group issues of the late '60s (see Exhibit 8.14) would appear to be Mexican American families and the families of the almost "forgotten American," the families of native American Indians who were just beginning to receive research attention in the 1970s.[15]

From the tabulations in Exhibit 8.14, we get evidence both of continuity of attention to Black American families, decreasing analysis of Oriental Americans and of rising salience of Hispanic and Native American groups.

The sheer volume of research on black families and the careful reviews of that work justify more space than can be given in this report.[16] Very briefly, research early in the century focused on the disorganization of black families, thought to be caused by the impacts of urbanization. "The Golden Age" for research on black family life encompassed the years 1930-45, with the now classic researches by Frazier (1932, 1939) on the natural history of black family institutions, and national surveys of the socialization of black children commissioned by the American Council on Education (Davis & Dollard, 1940; Reid, 1940; and Johnson, 1941). The next resurgence of research occurred during the unrest of the 1960s, sparked by what was interpreted as "scapegoating the black family" for the poverty in which most blacks found themselves (see the Moynihan report, 1965).

The research of the 1970s reflected three competing ideological perspectives identified by Allen (1978):

1. The "cultural equivalent" perspective taken by those who fail to acknowledge that black families constitute distinct cultural forms in contrast to white families, seeing black families as "culturally white" (Bernard, 1966); or as Frazier (1939) referred to the black middle class families as "Black Puritans." Scanzoni (1971) has suggested that black and white family differences are reducible to social class differences.
2. The "cultural deviant" perspective that recognizes the unique traits of black

families but sees them using white middle class patterns as the healthy norm, as deviant pathological and disfunctional within American society (Rainwater, 1970 and Schulz, 1969).

3. The "cultural variant" perspective that sees the range of black family patterns as distinctive adaptations to situational constraints, recognizing that while many family functions are universal, some situational constraints vary and thus require different structural adaptations.

Research using the third perspective has pointed up a host of functional consequences of the variant black family structures: greater tolerance of adolescent sexuality, greater interdependence among kindred, greater mutuality in sex within marriage, more equitable power allocation between genders, less differentiation of gender roles within and outside the family, and more positive self-images among adolescents. Allen cited research indicating high achievement orientation among adolescents but saw the unhappy underperformance by black adolescents as less attributable to the black family, which has provided the motivation for achievement, than to the limitations of the opportunity structures that are open to black adolescents. Allen concluded his review by noting that many prevailing stereotypes have been refuted in recent research using the third perspective. While innovative research methods have been initiated and new theories proposed, most knowledge remains tentative. As De Almeida (1975) noted, there remain "questions to be answered and answers to be questioned." The families of no other ethnic group, however, have been more thoroughly researched than those of Black Americans. The beginnings of recognition of distinctive ethnic family forms as "variant" rather than "deviant" or "tinted equivalents of middle class white families" are now observable and may in time enable us to accept the diversity of cultural scripts that constitute the basis for pluralism of families in American society.

Research Orientation to the Impacts of Public Policy on the Family.

One of the most surprising changes in research orientation in the 1970s has been the increase in legitimation for policy oriented research with respect to families. As contrasted with European family research, which, for almost 5 decades has been examining explicitly the impacts on families of economic legislation, children's allowances, housing policies, divorce legislation, and tax policies (Myrdal, 1945; DeBie, 1963, 1967; Schorr, 1965; Kamerman & Kahn, 1976, 1978), American family scholars have been loath until quite recently to address policy issues. The chief national association of family specialists, The National Council on Family Relations, from its beginning in 1938, excluded from its list of objectives the advocacy of policy positions on needed legislation while emphasizing research, family life education, and the development of improved counseling services for families. Discussions about the need for national policies on behalf of families surfaced briefly in the preparations for a nonofficial National Conference on Family Life in the White House in 1948. Symposium issues of the association's journal, then *Marriage and Family Living* (1948), and the *American Journal of Sociology* (Summer, 1948) were planned, with articles on national policies included to provide intellectual inputs for the

White House discussions. Subsequently, the 1950s saw no great surge in policy oriented research and no new content in the training programs of the universities to create cadres of action oriented or policy oriented researchers.

The Minnesota Inventory picked up policy-type writing for the first time from titles of articles in its Volume II, 1965-72, half of which are by European scholars (26 out of a total of 51 over the 8-year period). In successive volumes covering only English language articles, the quantity of writing was modest but increased rapidly (9 for 1973-74; 25 for 1975-76; and 41 for 1977-78). In 1979 the entire August issue of the *Journal of Marriage and the Family* was devoted to essays and research on family policies, including the impacts of state and national policies on family well-being. Indeed, 1979 saw the announcement of a new specialty periodical on family policy research edited by a leading family scholar, Graham Spanier, entitled *The Journal of Family Issues.*

In anticipation of the announced White House Conference on the Family in 1979 (later postponed to 1980), the 1978 national meetings of the National Council on Family Relations and of the Groves Conference on Marriage and the Family were devoted entirely to national family policy issues. The research base for these discussions proved to be inadequate, since few completed researches on the major issues were as yet in final report form.

Research on the impacts on families of large-scale change in American society such as boomtown growth (rapid urbanization), widespread economic deprivation caused by unemployment or underemployment, and military policies of drafting husbands and fathers resulting in war separations have been studied over the past 30 years (see Hill et al., 1952; Gans, 1967; and Berardo, 1966 on rapid urbanization; Angell, 1936; Cavan & Ranck, 1938; Bakke, 1940; Komorovsky, 1940; and Elder, 1974 on impacts of the Great Depression; Moen, 1978 on effects of unemployment of the 1975 recession; Hill, 1949; Boulding, 1950; and McCubbin, 1974 on effects of war separation of World War II and the Vietnam War, respectively). These studies did not get translated into challenges to public policy and/or changes in policies for the families that could be assessed (but see McCubbin, et al., 1976).

The scholars who have taken the initiatives in the 1970s on policy impacts on families are from the more public policy oriented disciplines of welfare economics, demography, and social work; but some family sociologists and anthropologists are also involved. Controlled field experiments assessing the impacts on family stability of income maintenance programs, begun in 1970, were designed and executed by economists and sociologists (Watts, 1969; Shore & Scott, 1973; Hannan et al., 1977). Impacts of population policies on family reproduction have been assessed by demographers, sociologists, and economists (Ryder, 1974; Freedman, 1975; Berleson, 1976; Caldwell, 1976, 1978; and Cochrane, 1979). Impacts of public welfare policies of Aid to Dependent Children on family stability have had the attention of social workers and sociologists (Burgess & Price, 1963; Moles, 1976; Honig, 1973; and Janowitz, 1976). Impacts of work time and scheduling policies – flexible working hours, shift work, shared jobs and part-time work – have received the attention of industrial sociologists and labor economists (Kantor, 1977; Mott et al., 1965; O'Toole, 1974; Stein et al. 1976; Gronseth, 1975; Wade, 1973; Racki, 1975; Maklan, 1977; and Clark et al., 1978).

Recognizing that the research base for meaningful policy changes with respect to

families was inadequate, both in quantity (too few studies to establish a consensus of findings) and in quality (studies remaining at the descriptive, journalistic, and impressionistic level), a training program was initiated in theoretical conceptualization and in the range of research designs appropriate for assessing impacts of state and national policies. It was initiated at the Family Study Center at the University of Minnesota (funded initially by a training grant from the National Institute of Mental Health, 1976-79) for advanced doctoral candidates and postdoctoral trainees (see Mattessich, 1977, for a codification of concepts, definitions, and taxonomy of family types required for family impact analyses; see also Ory & Leik, 1978, for an accounting of the procedures for family impact analyses and examples of such analyses produced by the first trainees). A second program of training oriented to postdoctoral trainees, entitled "Research on National Policy and the Family," is just getting underway at Duke University's Institute for Policy Sciences and Public Affairs. Focussing the training on five major areas of family policy (welfare and income transfer programs, health policy, housing and land use, family and law, and rural poverty), the program will include experiences in field observation as a closer approximation to family impact assessments than survey interviewing or standardized tests and questionnaires (Stack, personal communication, 1977).

A third program, the Family Impact Seminar at George Washington University, is not cadre producing but is concerned primarily with the practical and political feasibility of family impact analysis. The Seminar draws on 22 experts in family research and family policy from several different disciplines and regions of the country to examine the substantive, administrative, and political feasibility of developing a process for assessing the impact of public policies on families. Three reports have been issued: a staff report inventorying 268 federal programs that have direct impact on families (Family Impact Seminar, 1978), an interim report on the activities of the seminar (Johnson, 1978), and a family impact analysis of teenage pregnancy (Ooms & Maciocha, 1979).

It is too early to predict whether or not this last emergent movement in family research, namely, public policy oriented research and family impact analyses, will persist to become a long-term trend. Much will depend on the adequacy of the funding provided by private and public sources for research and training, since large-scale assessments of policy impacts are very expensive if carried out even statewide. Family policy specialists also need to win credibility for this genre of research among their less action-oriented peers who tend to apply scientific criteria of validity, and rigor and theoretical significance in allocating rewards. Finally, not the least important, will be assessments by policy makers of the utility of this new kind of research enterprise for the implementation of political goals. None of the other emergent developments highlighted by this report faces such a diverse set of expectations from reviewers nor so high a risk of a "hung jury."

Some Points of Controversy that Persist in Family Research.

Focussing as we have to this point in the report on modalities and consensus that lie behind the foregoing long-term trends and emergent developments, we have inadvertently passed over whatever controversy persists within the family research enterprise. There is

hardly unanimity among family scientists about what shall be studied, how it shall be studied, or what the findings mean. There are both sharp differences of view about the validity of research propositions and findings, and sturdy differences among schools of thought about the emphases and approaches that should be taken to the study of the family.

To give some of the flavor of controversy in the field, let me call attention to some substantive propositions over which debate continues:

1. People tend to marry people like themselves rather than opposites: 250 researches *for*; Winch (1958) and many psychoanalytically oriented clinicians *against.*
2. Personality adjustment of children is a direct function of the marital adjustment of their parents: Many psychoanalytic writers and marriage counselors *for*; Stroup (1956); Hawkes et al. (1956); Kaufman (1961); and LeMasters (1959) *against.*
3. For success in marriage, *when* one marries is more important than *whom* one marries: Levy & Munroe (1938) *for*; most marital adjustment researchers *against.*
4. The vulnerability of interracial, international, and interfaith marriages to dissolution is significantly greater than of homogamous marriages: Most marriage text writers *for*; Strauss (1954); Burchinal & Chancellor (1963); and Smith (1966) *against.*
5. The economic factor is not significant in divorce or marriage adjustment: Burgess & Cottrell (1939); Locke (1951) *for*; Goode (1951, 1956); Cutright (1971); Bumpass & Sweet (1972); and Peabody (1975) *against.*
6. Children in a family lower its vulnerability to divorce: Levy & Munroe (1938); Jacobson (1959); and U.S. Census reports *for*; Burgess & Cottrell (1939); Christensen & Philbrick (1952); Monahan (1955); and Thornton (1977) *against.*
7. Adolescents look more to their peers than to their parents for their values and standards: Parsons (1942); Davis (1944); Tryon (1944); and Coleman (1961) *for*; Elkin & Westley (1955); Bowerman & Kinch (1959); and Brittain (1963) *against.*
8. Fathers are of diminishing functional importance in the personality development of children: Mead (1949) almost alone *for*; Bach (1966); Herzog & Sudia (1973); Aldous & Kamiko (1972); and Lamb (1975) *against.*
9. Empathy, or role taking accuracy, makes for better marital adjustment and better parent-child adjustment: Buerkle & Badgley (1959, 1961); Luckey (1960); and Sarbin & Jones (1955) *for*; Locke et al. (1956); Stryker (1957); and Udry et al. (1961) *against.*
10. Urban middle class families are isolated and insulated from kinsmen and supporting social networks: Wirth (1938) and Parsons (1943, 1949) *for*; Sussman (1953); Litwak (1960); Reiss (1962); Adams (1968); and a host of social network researchers *against.*

Often the disagreement is between writers without data and researchers who have bothered to examine the proposition empirically. In other instances, the contradictions require assessment of the differences in the instruments used and the populations studied. There remains still a number of easy "sociology by assertion" type propositions in the marriage and family literature made by persuasive writers that at best are impressionistic

and intuitive; these beg empirical testing as has been done with propositions by Mead, Parsons, and Wirth in the above listing. These propositions rarely hold for the general population, often are true only for the limited elite group observed by the asserter. From the list of contradictory findings above, new studies are suggested that look for the differences in the givens and test these. Brittain (1963), for example, found evidence to resolve the conflict in proposition 7 above, that adolescents resolve cross-pressures from parents and peers in favor of competence: Peers for short-term issues of dress, courses to take in school – where conformity is immediate and visible – and parents for long-term issues of morality, mate selection, job choice, and identity issues.

Many propositions consist of a linkage of a demographic type variable (prescribing condition or setting category) with some marriage or family behavior variable; e.g., linking social class, educational level, ethnic background, religious affiliation, or stage of the life cycle with some performance variable in marriage and family behavior. The "causal jump," Hoffman & Lippitt (1960) would suggest, is too great. Hill et al. (1959) were able to establish, for example, that whatever association existed between fertility control and rural-urban residence was more than accounted for by the value orientations held, the family size attitudes affirmed, and the family organization patterns shared by families of the same classes and families of similar residence backgrounds.

Similar in kind are researches that attempt to account for the unexpectedly low correlations between two closely related subsystems within the family such as marriage adjustment of spouses and personality adjustment of their children (as in the controversial proposition 2 above). Searching for intervening variables that may link these two subsystems has been done in the work by Porter (1955) with marriage adjustment and parental acceptance of children; Farber (1959) marital integration and parental agreement on satisfaction with child's behavior, and on marital integration and effectiveness of parent-child communication (1963).

Finally, controversy persists about the conflict between economic theory (which assumes rationality) and the puzzling nonrational behaviors of families. Perception of family size as a problem has been found to be associated negatively with number of children! Do the poor get children or are they poor because they have many children? Threshold theories suggest that the more the pressure of numbers on resources, the earlier family planning actions will be taken. But these relations are reversed when families of different durations of marriage and family size are surveyed. The larger the family size the later family planning is initiated. Similarly, the decision to enter the labor force by the wife is not positively related, as might be expected from rational economic theory, to objective evidence of economic need. The effect of economic need on preplanning of consumption expenditures is negative rather than positive. These are circular propositions that require experimentally designed researches to determine what is the causal direction of the correlations obtained. Field and laboratory experiments are required if we are to account for puzzling findings. This is clearly an emergent movement that will be timely if the trend toward policy impact studies continues.

Summary of Achievements and Prospects

Family research has had a short history, largely limited to the 20th Century. Six

long-term trends have been identified and documented for the 8 decades covered:

1) An exponential growth in quantity of published research and of family oriented publication outlets.
2) A change in status from being suspect and subject to sanctions to a status of legitimacy and respectability as a scientific enterprise.
3) A change in emphasis from macroscopic studies of institutional scope to microscopic studies of within-family-interactions, and family transactions leading to programmatic studies of problem families and of family helping services.
4) A change from solo research enterprises to networks of teams coordinating their research efforts.
5) A trend toward accretion of theory by making explicit the conceptual framework used and cumulating empirically tested hypotheses into inductive theories.
6) Increasing attention to scientific methods of designing, executing, and analyzing research, including attention to representative sampling, measurement of variables, and inductive statistics in data analysis.

Much more limited in their visibility and duration are a set of emergent developments in family research which, if they persist, may become long-term trends:

1) Perspective taking reviews and assessments of family research have increased rapidly, including programs of inventorying propositions and codifying them into middle range theories.
2) An increasing disposition to undertake multidisciplinary projects despite the lack of an acceptable bridging theoretical orientation to facilitate integration of findings.
3) A breakthrough in capturing intrafamilial processes of the nuclear family through new methods of interaction process analysis.
4) The emergence of family studies at the "meso" level of behavior where the analysis is of the family as the behaving unit in larger networks – interfacing family and social networks, family and formal bureaucratic organizations; and the family exchanges with the marketplace, with the workplace, and with health delivery systems.
5) The extension of interest from the early stages of family formation to later stages of development – a life span orientation to family development.
6) Some evidence of responsiveness of family scholars to do research on the newly defined social problems of the 1960s.
7) Attending to the implications of rising ethnic pride by recognizing through research the distinctive family patterns that justify family pluralism in America.
8) Increased legitimation of research designed to assess the impacts of public and private policies on the family.

Looking at the prospects for the future of family research the world over, the evidence available supports an optimistic note. Considerable elbow room has been gained for movement in the areas the general public permits family scientists to study. The hitherto touchy areas of love, sex, marriage, and parenthood are being treated increasingly as a matter of course. We no longer are tempted to snicker, joke, or express either cynicism or sentimentalism when discussing our research tasks with others – defense mechanisms once used by family scholars. This makes the broad field of marriage and

family behavior increasingly accessible for research at a time when respondents and sponsors, because of critical family problems, are more likely to welcome scholars as collaborators.

Beyond the increasing legitimacy of the family research enterprise, more and more disciplines and service agencies, including policy makers in high places, are discovering the family as the basic social unit standing between the child and the larger society (Keniston et al., 1977). They are recognizing that if they wish to assure the healthy development of children, they must work through families, or at least take them into account if they are to succeed in attaining their objectives. Family researchers are in a strategic position to serve such agencies and policy makers in specifying the strengths and limitations of the family and the special properties and functions of its subsystems of spouses, parents and children, and siblings. There is, however, room for researchers to grow in bridging the communication gap between themselves and the helping professions.

There are clues from this report and from the signs of researchers' sensitivity to new areas that point the direction of future research. Researchers take their cues for research from several sources: from consumers (in universities this means students, and in communities it means spouses and parents of all ages) who want to know how to prepare for marriage and parenthood and how to keep their marriages healthy; from service agencies (particularly health, family and child services, and the schools) that need knowledge about family development in planning their programs; from research sponsors and funding agencies (foundation officers and program directors of government grants, often serving as brokers for policy making legislators at state and federal levels) who depend on family research for advising decision makers; and, perhaps for some researchers, the most important referents of all, from fellow social scientists whose work charts the theory into which family research must be integrated.

Accordingly, four lines of continued activity can be forecast: First, consumers generally will encourage researchers maintaining a practical, applied focus on issues of cohabitation, the commitment to marry, sexuality in and out of marriage, family planning, and the rearing of children. Having identified the factors associated with success in engagement, in marriage, and in fertility planning, it is certain researchers will attempt to identify the factors associated with marital satisfaction in the middle years of disenchantment, and will address the issues of operating the nuclear family effectively on a day-to-day basis. Researchers also will direct themselves more assiduously to the questions of upgrading the performance of healthy families by experimentally designed programs of marital and parent-child communication training. Laboratory methods and simulation games will replace field studies for this purpose.

Second, the family will be studied increasingly as the targeted unit of service in fertility control, medical service, mental health, and marketing. The innovations in social network analysis and of message exchanges between the family and bureaucracies offer new possibilities for empirically studying the family embedded in its community contexts. We should, therefore, expect that great strides will be taken in specifying the ways family organizations relate to the economic system, especially the occupational structure.

Third, the elites who define the social problems of our day – leaders of government, in education, business, and the news media – are shaping the direction of family research through their prescriptions of the central problems to be investigated. Enough researchers will recognize the value of such policy oriented research that they will direct their

professional careers in that direction. Research dealing with large-scale impacts of government programs will be increasingly relevant in preparation for the day in the distant future when all new legislation involving public policies that influence and constrain families (tax policies, income maintenance policies, policies of military service, housing policies, relocation policies, welfare policies, and so on) requires fully detailed Family Impact Reviews.

Finally, but not least, the accumulated bodies of research-based theories about family phenomena that have accumulated provide a heady challenge to the theory oriented researcher. The family as a system of interacting positions and as a problem solving association, in transaction with nonfamily associations, will receive added emphasis. The propositions generated will become more and more integrated into sociological theory both at the micro- and the mesolevel. Family researchers can expect to contribute to the more general theory of small groups, and by viewing the family as a microsocial system in a community context, they can examine in a manageable unit many theories about social systems.

Reuben L. Hill is Regents' Professor of Family Sociology, and Director, Minnesota Family Study Center, University of Minnesota. He expressed his indebtedness to past and present directors and associates of the Minnesota Inventory of Family Research: Joan Aldous, Nancy Dahl, Vera Cerny, and David Olson, whose five volumes of classified bibliographies, 1900-1978, provided most of the data about trends in family research for this report. Dr. Hill expressed thanks to readers of a preliminary draft of the report: Earl Beatt, Connie Joy, Robert Leik, Brent Miller, John Mogey, and Jeylan Mortimer. He acknowledged that Fae Bjurquist and Marion Hill processed the report from rough draft to final product. Finally, Dr. Hill expressed thanks to Dr. Edith H. Grotberg for her guidance and encouragement in transforming the early drafts into a report of some programmatic utility.

FOOTNOTES

[1] Since the late 1950s, the Minnesota Family Study Center has sponsored and operated a continuous inventory of family research covering more than 40 countries for the period 1970-72. In 1973, Minnesota's Department of Family Social Science assumed responsibility for the inventory, but, because of the high cost, restricted their coverage to English language publications. Five volumes have been published, each with a classified Key-Word-in-Title Bibliography, a Classified Subject Matter Bibliography with over 100 descriptor categories, plus a bibliography classified by authors. Four international trend reports and several research reviews have been published, drawing on the published inventories. These basic references have provided most of the trend data cited in this report:

Bibliographic Publications of the Minnesota Inventory of Marriage and Family Research

Aldous, J., & Hill, R. *International bibliography of research on marriage and the family, 1900-1964, Volume I.* Minneapolis: The University of Minnesota Press, 1967.

Aldous, J., & Dahl, N. *Research in marriage and the family, 1965-72, Volume II.* Minneapolis: The University of Minnesota Press, 1974.

Olson, D.H., & Dahl, N. *Inventory of marriage and family literature, Volume 3, 1973-74.* St. Paul: Family Social Science, 1975.

Olson, D.H., & Dahl, N. *Inventory of marriage and family literature, Volume 4, 1975-1976.* St. Paul: Family Social Science, 1977.

Olson, D.H. *Inventory of marriage and family literature, Volume 5, 1977-78.* Beverly Hills, California: Sage Publications, 1979.

Trend Reports Based in Part on the Minnesota Inventory

Hill, R. *Sociology of marriage and family behavior, 1945-56: A trend report and bibliography.* London: Basil Blackwell, 1958.

Mogey, J.M. Research on the family: The search for world trends. *Journal of Marriage and the Family,* May 1969, 31(2), 225-232.

Mogey, J.M. *Sociology of marriage and family behavior, 1957-1968: A trend report and bibliography.* The Hague: Mouton, 1971.

Cerny, V., Dahl, N., Kamiko, T., & Aldous, J. International developments in family theory. *Journal of Marriage and the Family,* February 1974, 169-173.

[2] In addition to the two trend reports commissioned by the Committee on Family Research of the International Sociological Association just described, other U.S. surveys evaluating family research methodologies in the postwar period are drawn up for this report. Nye & Bayer (1963) reviewed the publications on family research in the four leading sociological journals for a 15-year period, 1947-61, to assess the degree of methodological sophistication of the research over that period of time. Ruano, Bruce, & Mc Dermott (1969) did a follow-up for the 7-year period, 1962-68, in 12 sociological journals to make assessments similar to those of Nye & Bayer for the previous 15-year period.

Paralleling Ruano et al. for the same period, 1962-68, is a survey by Klein, Calvert, Garland, & Poloma (1969) examining the changes in use of conceptual frameworks to provide theoretical orientation to family research. These changes were assessed also in the Mogey report (1969). Most recently, Hodgson & Lewis (1979) have replicated Klein's survey for the period 1969-76, dealing particularly with the slow but steady incorporation of theory into family research designs. Although not strictly comparable to the Hill & Mogey trend reports in the time periods covered, in the category systems employed, or in the interpretations of the assessments, the findings update the earlier reports and are, in general, supportive of the trends delineated in the body of this report.

[3] The National Council on Family Relations (an interdisciplinary association of family scholars organized in 1938) publishes three such specialty journals, including the leader in the field: *The Journal of Marriage and the Family* (founded in 1938), the *Family Coordinator* (founded in 1951), and the *Journal of Family History* (founded in 1974). Other leading specialty journals are *Family Process, The Journal of Marriage and Family Counselling,* the *Journal of Comparative Family Studies,* and *Social Casework.*

[4] The journals in Exhibit 8.3 are predominantly multidisciplinary in readership but include professional organs of sociologists, psychologists, psychiatrists, demographers, and social biologists. A more quantitative estimate of the chief disciplines served by journals publishing family research is made by John Mogey (1969) in his 10% sample of U.S. family publications 1957-67. He ascribed the journals from which the article length publications came as follows: family specialty journals (34.6%), psychology (19.5%), sociology (18.8%), psychiatry (16.3%), social work (9.8%), and anthropology (0.5%).

[5] At the same time that barriers have been lowered by families themselves to co-operate in field and laboratory studies, government regulations have been developed under the Protection of Human Subjects Program that tend to nullify the willingness of families to be studied. Family research is peculiarly vulnerable to the charge of violating the privacies of individuals. The manifest objective of the regulations is to protect families and children from being exploited or harmed in the course of scientific experiments, but the latent consequence in the hands of bureaucratic enforcers at the university level, is to increase the costs of scientific research by delays, as regulators second guess the research objectives. Worse than that is the discouragement of informal exploratory studies that are necessary before launching large-scale investigations.

[6] Tabulating the studies by subcategories for the early period of 1900-28, it should be noted that the highest proportion were descriptive ethnographic studies of families in preliterate societies, rather than historical studies or comparative studies. Virtually no research on the family and social change was published in this early period; whereas, Mogey (1971) noted a sharp increase in family and social change studies from 92 in 1957-62 to 162 for the period 1963-68. It is in the 1970s, however, that the most dramatic increases in studies of family history are recorded. The Minnesota Inventory shows this emergent research enterprise in the United States increasing from less than *one* publication a year in 1900-64 to *10* in 1966 to *33* per year (or a total of 200 publications) in the mid-'70s (1973-78). Moreover, the scholars involved now publish their own specialty journal, *The Journal of Family History,* founded in 1974, an indicator of high cohesion and intercommunication binding the members of this network of scholars.

[7] Some 23 family research centers were reported as functioning in 1976, either engaged in resident instruction, research, public service, or combinations of all, according to a survey by Mary C. Rainey (1977) commissioned by the Center for the Family of the American Home Economics Association. Most active currently in research planning and cumulative research programs are: The Center for Family Studies, Arizona State University (Robert Lewis, Director); The Center for the Study of Youth Development, Boys Town (Luther Otto, Director); The Family Research Institute, Brigham Young University (Howard Bahr, Director); Community and Family Study Center, University of Chicago (Donald Bogue, Director); Center for the Family, University of Massachusetts, Amherst (Alan McDonald, Associate Director); Merrill-Palmer Institute of Human Development and Family Life, Detroit (Francis Palmer, President); Institute for Family and Child

Study, Michigan State University (Robert P. Boger, Director); Family Study Center, University of Missouri, Kansas City (Elizabeth Noble, Director); Family Study Center, University of Minnesota (Robert Leik, Director); The Laboratory of Socio-Environmental Studies, National Institute of Mental Health (Melvin Kohn, Director); Center for Children, Youth and the Family, Pennsylvania State University (Graham Spanier, Director); The Center for the Study of Families and Children, Vanderbilt University (Nicholas Hobbs, Director); Center for Family Research, George Washington University Medical School (David Reiss, Director).

[8] A history of the Center's first 12 years provides details of the evolution of its research and training programs (Hill, 1969).

[9] Only those articles, which appeared to identify explicitly or implicitly the conceptual clusters of one or more distinctive frameworks, were included in this assessment. In the surveys by Klein et al., Hodgson-Lewis, and Cerny et al., the content analysis was limited to those articles classified within the categories of "theoretical essays," and "theoretical-empirical presentations" in Exhibit 8.7.

[10] Mogey (1971) called attention to the fact that the emergence of perspective taking critiques, even if few in number for given countries, verifies the existence of a band of researchers interested in the development of a specialized area like the family. In the United States, the volume of critiques points to a dissatisfaction with the low level of sophistication and theoretical relevance of recent family research. Some examples of the foreign critiques and their locations are: Frederick Elkin (1964) on Canadian family research; Takeji Kamiko (1962), Takashi Koyama (1958), and Kiyomi Morioka (1962) in separate critiques of Japanese family research covering over 800 publications; Veronica Stolte Heiskanen on Finnish family sociology prepared for Soviet family scholars, to be published in Russian (forthcoming); Claire LePlae, *Recherches Sociologiques, Volume I* (1970) on Belgian family research, propositions and specifications; Anrée Michel, *Sociologie de la Famille et du Mariage* (Presses Universitaires de France, 1972) compared U.S., U.S.S.R., and French family research (1960s) for French audiences; Jean Cuisenier and Catherine Raguin, "A Critical Review of Research on the Russian Family," *Revue Française de Sociologie* (1967) for French scholars; Laszlo Cseh-Szombathy has made a thoughtful analysis of Hungarian family research in the 1960s, showing programmatic implications for an East European audience (*Family and Marriage in Today's Hungarian Society,* Budapest: Kozgasdasagi es Jogi Kiado, 1971); Gunther Lüschen and Eugen Lupri, *Soziologie der Familie* (Obladen: West Deutscher Verlag, 1970) offered a critical interpretation of American and German research for German family scholars.

[11] In addition to these areas, research based theories have been codified for 23 research domains in the recent publication edited by Burr et al. (1979) including Intergenerational Relations; Impacts of Wife-Mother Employment; Men's Work and Men's Families; Parental Power, Support, and Control Techniques in the Socialization of Children; The Influence of Social Class on Socialization; Sibling Relationships in the Family; Communication in Couples and Families; Determinants of Family Violence; Family Stress Theories; Family Processes and Child Outcomes; and Family Determinants and Effects of Deviance.

[12] For a careful review of the trends and correlates of divorce, and of explanatory theories, see George Levinger and Oliver Moles (1979).

[13] For a statement of the economic constraints of divorce and the growth of families headed by women, see Ross and Sawhill (1975).

[14] For a review of theories explaining the rise in family violence, see Gelles and Straus in Burr et al. (Eds.) (1979).

[15] In the extensive 160-page bibliography of social science research and writings on American Indians (Thornton and Grasmick, 1979), articles by historians predominate, with oral histories of individual families provided anecdotally; sociologists are next most frequent with descriptive studies of mate selection, marriage forms, patterns of divorce, and modes of child socialization. Only 20 publications are devoted to any aspect of the family among the 1,000s of publications classified, covering more than 100 years of scholarly inattention.

[16] I want to acknowledge my indebtedness to my erstwhile colleague, Dr. Walter R. Allen, for the overview of recent research on the Black Family from which I have drawn for this section of the report. See especially his lucid review: Black family research in the United States: A review, assessment and extension. *Journal of Comparative Family Studies,* Summer 1978, 9(2).

REFERENCES

Adams, B.N. Interaction theory and the social network. *Sociometry,* 1967, 30, 64-78.

Adams, B.N. *Kinship in an urban setting.* Chicago: Markham Publishing Co., 1968.

Adams, B.N. Isolation, function, and beyond: American kinship in the 1960s. In C. Broderick (Ed.), *A decade of family research and action, 1960-1969.* Minneapolis: National Council on Family Relations, 1971. Pp. 163-187.

Adams, B.N. Mate selection in the United States: A theoretical summarization. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 259-268.

Aldous, J., & Dahl, N. *Research in marriage and the family, Volume 2, 1965-1972.* Minneapolis: University of Minnesota Press, 1974.

Aldous, J., & Hill, R. *International bibliography of research in marriage and the family, 1900-1964.* Minneapolis: University of Minnesota Press, 1967.

Aldous, J., & Hill, R. Breaking the poverty cycle: Strategic points for intervention. *Social Work,* 1969, 14, 3-12.

Aldous, J., & Kamiko, T. A cross national study of the effects of father absence: Japan and the United States. In M.B. Sussman & B.E. Cogswell (Eds.), *Cross national family research.* Leiden, Netherlands: E.J. Brill, 1972. Pp. 86-101.

Allen, W.R. Black family research in the United States: A review, assessment, and extension. *Journal of Comparative Family Studies,* Summer 1978, 9(2), 167-188.

Angell, R.C. *The family encounters the depression.* New York: Charles Scribner's Sons, 1936.

Apple, D. The social structure of grandparenthood. *American Anthropologist,* 1956, 58, 656-663.

Axelrod, M. Urban structure and social participation. *American Sociological Review,* 1956, 21, 13-18.

Bach, C.R. Father fantasies and father typing in father separated children. *Child Development,* 1949, 17, 63-80.

Bakke, E.W. *The unemployed worker.* New Haven: Yale University Press, 1940.

Bales, R.F. *Interaction process analysis.* Cambridge: Addison-Wesley Publishing Co., Inc., 1950.

Beck, D.F., & Jones, M.A. *Progress on family problems: A nationwide study of clients' and counselors' views on family agency services.* New York: Family Service Association of America, 1974.

Bengston, V.L., & Black, K.D. Intergenerational relations and continuities in socialization. In W. Schaie and P. Baltes (Eds.), *Life span development psychology: Personality and socialization.* New York: Academic Press, 1973.

Berardo, F. Kinship interaction and migrant adaptation in an aerospace-related community. *Journal of Marriage and the Family,* 1966, 28(3), 296-304.

Berelson, B. Social science research on population: A review. *Population and Development Review,* June 1976, 2, 219-267.

Bernard, J. The adjustment of married mates. In H. Christensen (Ed.), *Handbook of marriage and the family.* Chicago: Rand McNally & Co., 1964.

Bernard, J. *Marriage and family among Negroes.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1966a.

Bernard, J. Marital stability and patterns of status variables. *Journal of Marriage and the Family,* November 1966b, 28, 421-439.

Blood, R.O., & Wolfe, D.M. *Husbands and wives.* New York: Free Press, 1960.

Bolton, C.D. Mate selection as the development of a relationship. *Marriage and Family Living,* 1961, 22, 234-240.

Bott, E. *Family and social network.* London: Tavistock Publications, 1957. Revised edition, New York: Free Press, 1971.

Boulding, E. Family adjustments to war separation and reunion. *The Annals of the American Academy of Political and Social Science,* 1950.

Bowerman, C.E., & Kinch, J.W. Changes in family and pure orientations of children between the fourth and the tenth grade. *Social Forces,* 1959, 37, 206-211.

Brittain, C.B. Adolescent choice and parent-peer cross pressures. *American Sociological Review,* 1963, 28, 385-391.

Broderick, C. (Ed.). *A decade of family research and action, 1960-1969.* Minneapolis: National Council on Family Relations, 1971.

Broderick, C., & Pulliam-Krager, H. Family process and child outcomes. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 604-615.

Buerkle, J.V., Anderson, T.R., & Badgley, R.F. Altruism, role conflict, and marital adjustment: A factor analysis of marital interaction. *Marriage and Family Living,* February 1961, 23, 20-26.

Buerkle, J.V., & Badgley, R.F. Couple role taking: The Yale Interaction Battery. *Marriage and Family Living,* 1959, 21, 53-58.

Bumpass, L., & Sweet, J. Differentials in marital instability: 1970. *American Sociological Review,* 1972, 37, 754-766.

Burchinal, L.G., & Chancellor, L.E. Survival rates among religiously homogamous and interreligious marriages. *Social Forces,* 1963, 41, 353-362.

Burgess, E.W. The family as a unity of interacting personalities. *The Family,* 1926, 7, 3-9.

Burgess, E.W., & Cottrell, L.S. *Predicting success or failure in marriage.* New York: Prentice-Hall, Inc., 1939.

Burgess, E.W., & Wallin, P. *Engagement and marriage.* Philadelphia: J.P. Lippincott, 1953.

Burgess, M.E., & Price, D.O. *An American dependency challenge.* Chicago: American Public Welfare Association, 1963.

Burr, W.R. *Theory construction and the sociology of the family.* New York: John Wiley & Sons, Inc., 1973.

Burr, W.R., Hill, R., Nye, I., & Reiss, I. (Eds.). *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979.

Burr, W.R., Hill, R., Nye, I., & Reiss, I. (Eds.). *Contemporary theories about the family* (Vol. 2). *General family theories.* New York: Free Press, 1980.

Caldwell, J.C. Toward a restatement of demographic transition theory. *Population and Development Review,* 1976, 2, 321-367.

Caldwell, J.C. A theory of fertility: From high plateau to destabilization. *Population and Development Review,* 1978, 4, 553-579.

Cavan, R.S. *The American family.* New York: Thomas Y. Crowell Company, 1963.

Cavan, R.S., & Ranck, K.H. *The family and the depression.* Chicago: University of Chicago Press, 1938.

Cerny, V., Dahl, N., Kamiko, T., & Aldous, J. International developments in family theory: A continuance of the initial "Pilgrims' Progress." *Journal of Marriage and the Family,* February 1974, 36, 169-173.

Christensen, H.T., & Philbrick, R.E. Family size as a factor in the marital adjustments of college couples. *American Sociological Review,* June 1952, 17, 306-312.

Clark, R.A., Nye, I., & Gecas, V. Work involvement and marital role performance. *Journal of Marriage and the Family,* 1978, 40, 9-21.

Clayton, R.R. *The family, marriage, and social change.* Boston: D.C. Heath and Company, 1979.

Cochrane, S.H. *Fertility and education: What do we really know?* Baltimore: Johns Hopkins University Press, 1979.

Coleman, J.S. *The adolescent society.* New York: Free Press, 1961.

Cromwell, R.E., & Olson, D. (Eds.). *Power in families.* New York: John Wiley & Sons, Inc., 1975.

Cuisenier, J., & Raguin, K. De quelques transformations dans le systeme familial russe: Revue critique. *Revue Française Sociologique,* 1967, 8, 521-557.

Cuming, E., & Henry, W. *Growing old.* New York: Basic Books, 1961.

Cutright, P. Income and family events: Marital stability. *Journal of Marriage and the Family,* 1971, 33, 291-306.

Cseh-Szombathy, L. *Family and marriage in today's Hungarian society.* Budapest: Kozgasdasagi es Jodi Konyvkidó, 1971.

Davis, A., & Dollard, J. *Children of bondage.* New York: Harper and Row, Publishers, 1940.

Davis, K. Adolescence and the social structure. *Annals of the American Academy of Political and Social Science,* 1944, 236, 8-16.

DeAlmeida, E. The black family: Its locus in theory and status in research. Unpublished special area paper, Duke University, 1975.

DeBie, P. Politique familiale et politique démographique. *Population et Famille,* 1963, 1, 6-17.

DeBie, P. Guiding images of family policy in Belgium. In P. DeBie & C. Presvelou (Eds.), *National family guiding images and policies.* Louvain, Belgium: Center for Sociological Research, 1967. Pp. 73-99.

Deutscher, I. *Married life in the middle years: A study of the middle class urban post-parental couple.* Kansas City: Community Studies, Inc., 1959.

Dymond, R. The relation of accuracy of perception of the spouse and marital happiness. *American Psychologist,* 1953, 8, 344-350.

Dymond, R. Interpersonal perception and marital happiness. *Canadian Journal of Psychology,* 1954, 8, 164-171.

Elder, G.H., Jr. *Children of the great depression.* Chicago: University of Chicago Press, 1974.

Eliot, T.D. Handling family strains and shocks. In H. Becker & R. Hill (Eds.), *Family, marriage, and parenthood.* Boston: D.C. Heath and Company, 1955. Pp. 616-640.

Elkin, F. *The family in Canada. An account of present knowledge and gaps in knowledge about Canadian families.* Ottawa: Canadian Conference on the Family, 1964.

Elkin, F., & Wesley, W. The myth of adolescent culture. *American Sociological Review,* December 1955, 20, 680-684.

Family Impact Seminar. *Towards an inventory of federal programs with direct impact on families.* Washington, D.C.: Institute for Educational Leadership, George Washington University, 1978.

Farber, B. A model for the study of the family as mutually contingent careers. Urbana, Illinois: University of Illinois, 1956. (Mimeo)

Farber, B. Marital integration and parents agreement on satisfaction with their child's behavior. *Marriage and Family Living,* 1959, 21, 65-69.

Farber, B. Family organization and parent child communication. *Monographs of the Society for Research and Child Development,* 1963, 28, 3-78.

Farber, B., Mindel, C.H., & Lazerwitz, B. The Jewish American family. In C.H. Mindel & R.W. Habenstein, *Ethnic families in America: Patterns and variations.* New York: Elsevier Publishing Co., 1976. Pp. 347-379.

Firth, R. *Two studies of kinship in London.* New York: Humanities Press, Inc., 1957.

Foote, N.N., & Cottrell, L.S. *Identity and interpersonal competence.* Chicago: University of Chicago Press, 1955.

Frazier, E.F. *The Negro family in Chicago.* Chicago: University of Chicago Press, 1932.

Frazier, E.F. *The Negro family in the United States.* Chicago: University of Chicago Press, 1939.

Freedman, R. *The sociology of human fertility: An annotated bibliography.* New York: Irvington Publishers, Inc., 1975.

Furstenberg, F. *Unplanned parenthood: The social consequences of teenage childbearing.* New York: Free Press, 1976.

Gans, H. *The Levittowners.* New York: Pantheon Books, Inc., 1967.

Garique, P. French Canadian kinship and urban life. *American Anthropologist,* December 1965, 58, 1090-1101.

Gecas, V. The influence of social class in socialization. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979.

Geiger, K. Deprivation and solidarity in the Soviet urban family. *American Sociological Review,* January 1955, 20, 57-68.

Gelles, R., & Straus, M.A. Determinants of violence in the family: Toward a theoretical integration. In W.R. Burr et al. (Eds.), *Contemporary theories about the family.* (Vol. 1). *Research-based theories.* New York. Free Press, 1979. Pp. 549-582.

Gilmartin, B.G. *The Gilmartin report.* Secauces, New Jersey: Citadel Press, Inc., 1978.

Girard, A. *Le choix du conjoint.* Paris: Presses Universitaires de France, 1964.

Goode, W.J. Economic factors and marital stability. *American Sociological Review,* December 1951, 16, 802-811.

Goode, W.J. *After divorce.* New York: Free Press, 1956.

Goode, W.J. Horizons in family theory. In R.K. Merton et al. (Eds.), *Sociology today.* New York: Basic Books, Inc., Publishers, 1959.

Goode, W.J., Hopkins, E.H., & McClure, H.M. *Social systems and family patterns: A propositional inventory.* Indianapolis: Bobbs-Merrill Co., Inc., 1971.

Gronseth, E. Work sharing families: Adaptations of pioneering families with husband and wife in part time employment. *Acta Sociologica,* 1975, 18(2-3), 202-221.

Handel, G., & Hess, R.D. The family as an emotional organization. *Marriage and Family Living,* 1956, 18, 99-102.

Hannan, M.T., Tuma, N.B., & Groeneveld, L.P. Income and independence effects on marital dissolution: Results from the Seattle and Denver income maintenance experiments. *American Journal of Sociology,* May 1977, 82, 1186-1211.

Hansen, D.A., & Hill, R. Families under stress. In H. Christensen (Ed.), *Handbook of marriage and the family.* Chicago: Rand McNally & Co., 1964.

Hansen, D.A., & Johnson, V.A. Rethinking family stress theory: Definitional aspects. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 582-604.

Hartup, W.W. Perspectives on child and family interaction: Past, present, and future. In R.M. Lerner & G.B. Spanier (Eds.), *Child influences on marital and family interaction: A life-span perspective.* New York: Academic Press, 1979.

Hawkes, G.R., Burchinal, L.G., Gardner, B., & Porter, B.M. Marital satisfaction, personality characteristics, and parental acceptance of children. *Journal of Clinical Psychology,* 1956, 48, 195-200.

Herzog, E., & Sudia, C.E. Children in fatherless families. In B. Caldwell & H. Ricutti (Eds.), *Review of child development research* (Vol. III). Chicago: University of Chicago Press, 1973. Pp. 141-232.

Hess, R.S., & Handel, G. *Family worlds.* Chicago: University of Chicago Press, 1959.

Hill, R. *Families under stress.* New York: Harper & Brothers, 1949.

Hill, R. Interdisciplinary workshop on marriage and family research. *Marriage and Family Living,* Winter 1951, 13, 13-29.

Hill, R. A critique of contemporary marriage and family research. *Social Forces,* 1955, 33, 268-277.

Hill, R. Generic features of families under stress. *Journal of Social Casework,* February-March 1958, 39, 139-150.

Hill, R. *Sociology of marriage and family behavior, 1945-56: A trend report and bibliography.* London: Basil Blackwell, 1958.

Hill, R. *The Minnesota Family Study Center: Twelve years of development, 1957-69.* Minneapolis: University of Minnesota, 1969.

Hill, R. Sociological frameworks appropriate for family oriented psychiatry. *Voices,* Spring 1969, 5(1), 65-74.

Hill, R. *Family development in three generations: A longitudinal study of changing family patterns of planning and achievement.* Cambridge, Massachusetts: Schenkman Publishing Co., 1970.

Hill, R. Modern systems theory and the family: A confrontation. *Social Science Information,* 1971, 10, 7-26.

Hill, R., & Hansen, D.A. The identification of conceptual frameworks utilized in family study. *Marriage and Family Living,* 1960, 22, 299-311.

Hill, R., & Hansen, D.A. Families in disaster. In G.W. Baker & D.W. Chapman (Eds.), *Man and society in disaster.* New York: Basic Books, Inc., Publishers, 1962. Pp. 185-227.

Hill, R., Katz, A.M., & Simpson, R.L. An inventory of research in marriage and family behavior: A statement of objectives and progress. *Marriage and Family Living,* 1957, 19, 89-92.

Hill, R., Moss, J., & Wirths, C. *Eddyville's families.* Chapel Hill, North Carolina: Institute for Research in Social Science, University of North Carolina, 1953.

Hill, R., Stycos, J.M., & Back, K.W. *The family and population control.* Chapel Hill: University of North Carolina Press, 1959.

Hochschild, A. Disengagement theory: A critique and proposal. *American Sociological Review,* 1975, 40, 553-569.

Hodgson, J.W., & Lewis, R.A. Pilgrims' Progress III: A trend analysis of family theory and methodology. *Family Process,* June 1979, 18(2), 163-175.

Hoffman, L., & Lippitt, R. The measurement of family life variables. In P. Mussen (Ed.), *Handbook of research methods in child development.* New York: John Wiley & Sons, Inc., 1960. Pp. 945-1015.

Honig, M. The impact of welfare payment levels on family stability. In Joint Economic Committee (Eds.), *The family, poverty, and welfare programs: Factors influencing family instability.* Studies in Public Welfare, Number 12, Part I, Washington, D.C.: U.S. Government Printing Office, 1973.

Howard, G.E. *A history of matrimonial institutions.* Chicago: University of Chicago Press, 1904.

Howard, R.L. A social history of American family sociology, 1865-1970. Columbia, Missouri: University of Missouri PhD dissertation, 1975.

Jackson, J.K. The adjustment of the family to the crisis of alcoholism. *Quarterly Journal of Studies of Alcohol,* December 1954, 15, 562-586.

Jacobsohn, P., & Matheny, A.R. Mate selection in open marriage systems. *International Journal of Comparative Sociology,* September 1962, 3, 98-124.

Jacobson, P.H. *American marriage and divorce.* New York: Holt, Rinehart & Winston, Inc., 1959.

Janowitz, B.S. The impact of FDC on illegitimate birth rates. *Journal of Marriage and the Family,* 1976, 38, 485-494.

Johnson, A.S. *Family impact seminar interim report.* Washington, D.C.: Institute for Educational Leadership, George Washington University, 1978.

Johnson, A.S., & Staff. *Toward an inventory of federal programs with direct impact on families.* Family Impact Seminar, George Washington University, Institute for Educational Leadership, February 1978.

Johnson, C.S. *Growing up in the black belt.* New York: Harper & Row Publishers, 1941.

Kamerman, S.B., & Kahn, A.J. *European family policy currents: The question of families with very young children.* New York: Columbia University School of Social Work, 1976.

Kamerman, S.B., & Kahn, A.J. *Family policy: Government and families in fourteen countries.* New York: Columbia University Press, 1978.

Kamiko, T. Trends of the Japanese postwar family research. *Studies in the Humanities,* 1962, 13, 67-81.

Kanter, R.M. *Work and family in the United States: A critical review and agenda for research and policy.* New York: Russell Sage Foundation, 1977.

Kantor, D., & Lehr, W. *Inside the family: Toward a theory of family process.* San Francisco: Jossey-Bass, Inc., Publishers, 1975.

Kaufman, J.H. Interpersonal relations among traditional and emergent families among midwest Mennonites. *Marriage and Family Living,* 1961, 23, 247-252.

Keniston, K., & Carnegie Council on Children. *All our children: The American family under pressure.* New York: Harcourt Brace, Jovanovich, Inc., 1977.

Klein, D.M. A social history of a grass-roots institution: The case of the National Council on Family Relations Workshop on Theory Construction and Research Methodology. Plenary paper, Workshop on Theory Construction and Research Methodology, National Council on Family Relations, Boston, August 1979.

Klein, D.M., & Hill, R. Determinants of family problem solving effectiveness. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979.

Klein, D., Schvaneveldt, J.D., & Miller, B.C. The attitudes and activities of contemporary family theorists. *International Journal of the Sociology of the Family,* 1977, 8, 5-27.

Klein, J.F., Calvert, G.P., Garland, T.N., & Poloma, M.M. Pilgrims' Progress I: Recent developments in family theory. *Journal of Marriage and the Family,* 1969, 31, 677-687.

Kohn, M.L., & Clausen, J.A. Parental authority behaviour and schizophrenia. *American Journal of Orthopsychiatry,* April 1956, 26, 297-313.

Komarovsky, M. *The unemployed man and his family.* New York: Dryden Press, 1940.

Komarovsky, M., & Waller, W. Studies of the family. *American Journal of Sociology,* May 1945, 50, 443-451.

Koos, E.L. *Families in trouble.* New York: King's Crown Press, 1946.

Koyama, T. Role structure in the contemporary family. *Memoirs* (Tokyo: Research and Training Institute for Family Court Probation Officers), 1967, 12, 12-25.

Kuhn, M.F. Major trends in symbolic interaction theory in the past twenty-five years. *The Sociological Quarterly,* Winter 1964, 5, 61-84.

Kuhn, M.F., & McPartland, T.S. An empirical investigation of self-attitude. *American Sociological Review,* 1954, 19, 68-78.

Laing, R.D., Phillipson, H., & Lee, A. *Interpersonal perception: A theory and a method of research.* London: Tavistock, 1966.

Lamb, M. Fathers: Forgotten contributors to child development. *Human Development,* 1975, 18, 245-266.

Larson, L.E. Multilevel family interpersonal perception of ideal marital roles: An exploratory study. *Journal of Comparative Family Studies,* 1975, 6, 223-238.

Lee, G. Effects of social networks on the family. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 27-57.

LeMasters, E. In holy deadlock: A study of unsuccessful marriages. *Midwest Sociologist,* 1959, 21, 86-91.

Lennard, H., & Bernstein, A. Patterns in human interaction. San Francisco: Jossey-Bass, Inc., Publishers, 1969.

LePlae, C. La sociologie de la famille en Belgique 1957-1968. *Recherches Sociologiques,* June 1970, 1, 5-44.

Levinger, G., & Moles, O.C. (Eds.). *Divorce and separation: Context, causes, and consequences.* New York: Basic Books, Inc., Publishers, 1979.

Levy, J., & Munroe, R. *The happy family.* New York: Alfred A. Knopf, Inc., 1938.

Lewis, R.A., & Spanier, G.B. Theorizing about the quality and stability of marriage. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 268-295.

Litwak, E. Occupational mobility and extended family cohesion. *American Sociologic Review,* 1960, 25, 9-21.

Litwak, E., & Szelenyi, I. Primary group structures and their functions: Kin, neighbors, and friends. *American Sociological Review,* 1969, 34, 465-481.

Locke, H.J. *Predicting adjustment in marriage.* New York: Holt, Rinehart & Winston, Inc., 1951.

Locke, H.J. et al. Correlates of primary communication and empathy. *Research Studies, State College, Washington,* 1956, 24, 116-124.

Locke, H.J., & Karlsson, G. Marital adjustment and prediction in Sweden and the United States. *American Sociological Review,* February 1952, 17, 10-17.

Luckey, E.B. Marital satisfaction and congruent self-spouse concepts. *Social Forces,* December 1960, 39, 153-157.

Luckey, E.B. Perceptual congruence of self and family concepts as related to marital interaction. *Sociometry,* 1961, 24, 234-250.

Lüschen, G., & Lupri, E. (Eds.). *Sociologie der familie.* Obladen: West Deutscher Verlag, 1970.

Maklan, D.M. *The four-day workweek: Blue collar adjustment to a nonconventional arrangement of work and leisure time.* New York: Praeger Publishers, Inc., 1977.

Mattessich, P. *Family impact analysis.* St. Paul: Minneapolis State Planning Agency, 1977.

Mattessich, P. Childlessness and its correlates in historical perspective. *Journal of Family History,* August 1979, 4.

McCubbin, H.I. Integrating coping behavior in family stress theory. *Journal of Marriage and the Family,* May 1979, 41, 237-244.

McCubbin, H.I., Dahl, B.B., & Hunter, E.J. (Eds.). *Families in the military system.* Beverly Hills: Sage Publications, Inc., 1976.

McCubbin, H.I., Marsden, M., Durning, K.P., & Hunter, E.J. The military family and social policy. A paper presented at the American Sociological Association Annual Meeting, New York, August 30-September 3, 1976.

McCubbin, H.I., Metres, P.J., Jr., Hunter, E.J., & Plag, J.A. *Family separation and reunion: Families of prisoners of war and servicemen missing in action.* San Diego: Center for Prisoner of War Studies, Naval Health Research Center, 1974.

Mead, M. *Male and female.* New York: William Morrow & Co., Inc., 1949.

Michel, A. *Sociologie de la famille et du mariage.* Paris: Presses Universitaires de France, 1972.

Miller, B.C. A multivariate developmental model of marital satisfaction. *Journal of Marriage and the Family,* 1976, 38, 643-657.

Miller, S., Nunnally, E.W., & Wackman, D.B. *Alive and aware: Improving communication in relationships.* Minneapolis: Interpersonal Communication Programs, Inc., 1975.

Mindel, C.H., & Habenstein, R.W. (Eds.). *Ethnic families in America: Patterns and variations.* New York: Elsevier Publishing Co., 1976.

Moen, P. The family dimension of occupational participation. *Minnesota Family Study Center, Family Impact Series,* Report 8, 1977, 1-63.

Moen, P. et al. Family impacts of the 1975 recession: Unemployment among families with children. Unpublished PhD thesis, University of Minnesota, 1978.

Mogey, J.M. *Family and neighborhood.* London: Oxford University Press, 1956.

Mogey, J.M. *Sociology of marriage and family behavior, 1957-1968: A trend report and bibliography.* The Hague: Mouton, 1971.

Moles, O. Marital disillusion and public assistance payments. *Journal of Social Issues,* Winter 1976, 32, 87-102.

Monahan, T.P. Is childlessness related to family stability? *American Sociological Review,* 1955, 20, 446-456.

Morioka, K. A critical review of family life cycle studies. *Journal of the Social Sciences,* 1962, 4, 1-21; and 1964, 5, 1-26.

Mortimer, J.T. Occupation-family linkages as perceived by men in the early stages of professional and managerial careers. In H. a Lopata (Ed.), *Research in the interweave of social roles: Women and men* (Vol. 1). Greenwich, Connecticut: JAI Press, 1979.

Moss, J.J. Cross national trends and sociological factors in the decision of when to marry. *Journal of Marriage and the Family,* May 1965, 27, 230-243.

Mott, P.E., Mann, F.C., McLoughlin, Q., & Warwick, D.P. *Shift work: The social, psychological, and physical consequences.* Ann Arbor, Michigan: University of Michigan Press, 1965.

Moynihan, D.P. *The Negro family: The case for national action.* Washington, D.C.: U.S. Department of Labor, Office of Planning and Research, 1965.

Myrdal, A. *Nation and family: The Swedish experiment in democratic family and population policy.* London: Kegan Paul, French, Trubner and Company, 1945.

Neugarten, B., & Weinstein, K. The changing American grandparent. *Journal of Marriage and the Family,* 1964, 26, 199-204.

Nye, I., & Bayer, A. Some recent trends in family research. *Social Forces,* March 1963, 41(3), 290-301.

Olson, D.H. *Inventory of marriage and family literature, 1977-1978* (Vol. V). Beverly Hills, California: Sage Publications, Inc., 1979.

Olson, D.H., & Dahl, N.S. *Inventory of marriage and family literature, 1973-1974* (Vol. III). St. Paul: Family Social Science, University of Minnesota, 1975.

Olson, D.H., & Dahl, N.S. *Inventory of marriage and family literature, 1975-1976* (Vol. IV). St. Paul: Family Social Science, University of Minnesota, 1977.

Ooms, T., & Maciocha, T. *Teenage pregnancy and family impact: New perspectives on policy.* Washington, D.C.: Institute for Educational Leadership, George Washington University, 1979.

Ory, M.G., & Leik, R.K. *Policy and the American family: A manual for family impact analysis.* Minneapolis: Minnesota Family Study Center, Family Impact Series, Number 14, 1978.

O'Toole, J. (Ed.). *Work and the quality of life.* Cambridge, Massachusetts: MIT Press, 1974.

Otto, L.B. Antecedents and consequences of marital timing. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979. Pp. 101-127.

Owen, J.D. Workweeks and leisure: An analysis of trends, 1948-75. *Monthly Labor Review,* August 1976, 3-8.

Parsons, T. Age and sex in the social structure of the United States. *American Sociological Review,* October 1942, 7, 604-616.

Parsons, T. The kinship system of the contemporary United States. *American Anthropologist,* 1943, 45, 22-38.

Parsons, T. The social structure of the family. In R.N. Anshen (Ed.), *The family: Its function and destiny.* New York: Harper and Brothers, 1949.

Peabody, G.E. *Income and marital stability: A review of empirical findings.* Paper 979-02. Washington, D.C.: The Urban Institute, April 9, 1975.

Piel, J. La cummunication entre epoux et la satisfaction conjugale. In P. DeBie, K. Dobbelaere, C. LePlae, and J. Piel, *La dyade conjugale.* Bruxelles: Les Editions vie Ouvriere, 1968, 51-75.

Pineo, P.C. Disenchantment in the later years of marriage. *Marriage and Family Living,* February 1961, 23, 3-11.

Pleck, J.H. The work-family role system. *Social Problems,* June 1977, 417-427.

Porter, B.M. The relationship between marital adjustment and parental acceptance of children. *Journal of Home Economics,* 1955, 47, 157-164.

Racki, G. The effects of flexible working hours. PhD dissertation, The University of Lausanne, 1975.

Rainwater, L. *Behind ghetto walls.* Chicago: Aldine-Atherton, Inc., 1970.

Rapoport, R., & Rapoport, R. New light on the honeymoon. *Human Relations,* 1964, 17, 35-56.

Rapoport, R., & Rapoport, R. (with Ziona Strelitz). *Leisure and the family life cycle.* London: Routledge and Kegan Paul, 1975.

Rausch, H.L., Greif, A.C., & Nugent, J. Communication in couples and families. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979.

Reid, I.D.A. *In a minor key: Negro youth in story and fact.* New York: Harper and Row, Publishers, 1940.

Reiss, D. Varieties of consentual experience: I. A theory for relating family interaction to individual thinking. II. Dimensions of a family's experience of its environment. *Family Process,* 1971, 10, 1-35.

Reiss, I.L. *Premarital sexual standards in America.* New York: Free Press, 1960.

Reiss, I.L. *The social context of premarital sexual permissiveness.* New York: Holt, Rinehart & Winston, Inc., 1967.

Reiss, I.L., Anderson, R., & Sponaugle, G.C. A multivariate analysis of extramarital sexual permissiveness. *Journal of Marriage and the Family,* 1980, in press.

Reiss, P.J. The extended kinship system: Correlates of and attitudes on frequency of interaction. *Marriage and Family Living,* November 1962, 24, 333-339.

Richardson, H.P. *Patients have families.* New York: Commonwealth Fund, 1945.

Riley, M.W., & Foner, A. *Aging and society.* New York: Russell Sage Foundation, 1968.

Riskin, J., & Faunce, E. An evaluative review of family interaction research. *Family Process,* 1972, 11, 365-455.

Rodman, H. Marital power in France, Greece, Yugoslavia, and the United States: A cross national discussion. *Journal of Marriage and the Family,* 1967, 29, 320-324.

Rodman, H. Marital power and the theory of resources in cultural context. *Journal of Comparative Family Studies,* 1972, 3, 50-67.

Rollins, B., & Feldman, H. Marital satisfaction over the family life cycle. *Journal of Marriage and the Family,* 1970, 32, 20-27.

Ross, H.L., & Sawhill, I.B. *Time of transition: The growth of families headed by women.* Washington, D.C.: The Urban Institute, 1975.

Ruano, B.J., Bruce, J.D., & McDermott, M.M. Pilgrims' Progress II: Recent developments in family research. *Journal of Marriage and the Family,* 1969, 31, 688-698.

Ryder, N.B. The family in developed countries. *Scientific American,* September 1974, 231(3), 122-132.

Sarbin, T.R., & Jones, D.S. An experimental analysis of role behavior. *Journal of Abnormal and Social Psychology,* 1955, 51, 236-241.

Saunders, L. Empathy, communication, and the definition of life's satisfaction in the post-parental period. *Family Perspectives,* 1974, 8, 21-35.

Scanzoni, J. *The black family in modern society.* Boston: Allyn & Bacon, Inc., 1971.

Scanzoni, J. Social processes and power in families. In W.R. Burr et al. (Eds.), *Contemporary theories about the family* (Vol. 1). *Research-based theories.* New York: Free Press, 1979.

Schelsky, H. *Wandlungen der deutschen familie in der gegenwart.* Stuttgart: Enke, 1956.

Schorr, A.L. *Social security and social services in France.* Washington, D.C.: U.S. Government Printing Office, 1965 (prepared for the Social Security Administration, Division of Research and Statistics).

Schorr, A.L. *Poor kids.* New York: Basic Books, Inc., Publishers, 1966.

Schulz, D. *Coming up black.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1969.

Shore, A., & Scott, R. Work response and family composition changes in a negative income tax experiment. In E. Sheldon (Ed.), *Family economic behavior.* Philadelphia: J.P. Lippincott Co., 1973.

Simon, J.L. *The effects of income on fertility.* Chapel Hill: North Carolina Population Center, 1974.

Smith, C.E. Negroe-white in a marriage: Forbidden sexual union. *Journal of Sex Research,* 1966, 2, 169-173.

Smythe, L.S.C. Factors associated with success of Chinese families as families. *Marriage and Family Living,* November 1952, 14, 286-294.

Spanier, G.B., Lewis, R.A., & Cole, C.L. Marital adjustment over the family life cycle: The issue of curvilinearity. *Journal of Marriage and the Family,* 1975, 37, 265-275.

Spiegel, J., & Bell, N. The family of the psychiatric patient. In S. Arieti (Ed.), *Handbook of American psychiatry* (Vol. 1). New York: W.W. Norton & Company, Inc., 1959.

Spiegel, J., & Kluckhohn, F. *Integration and conflict in family behavior.* Topeka, Kansas: Group for the Advancement of Psychiatry, 1954.

Stanton, H., Back, K.W., & Litwak, E. Role playing in survey research. *American Journal of Sociology,* September 1956, 62, 172-177.

Staples, R. Toward a sociology of the black family: A decade of theory and research. *Journal of Marriage and the Family,* February 1971, 33, 19-38.

Stein, B.A., Cohen, A., & Gadon, H. Flextime: Work when you want to. *Psychology Today,* June 1976, 10, 40-43.

Straus, M.A. *Family measurement techniques.* Minneapolis: University of Minnesota Press, First Edition, 1969; Revised Edition, 1979.

Straus, M.A., & Tallman, I. SIMFAM: A technique for observational measurement and experimental study of families. In J. Aldous, T. Condon, R. Hill, M. Straus, & I. Tallman (Eds.), *Family problem solving: A symposium on theoretical, methodological, and substantive concerns.* Hinsdale, Illinois: Dryden Press, 1971. Pp. 379-440.

Strauss, A. Strain and harmony in American-Japanese war bride marriages. *Marriage and Family Living,* May 1954, 16, 99-106.

Strodtbeck, F.L. Husband-wife interaction over revealed differences. *American Sociological Review,* August 1951, 16, 468-473.

Stroup, A.L. Marital adjustment of the mothers and the personality of the child. *Marriage and Family Living,* 1956, 18, 109-113.

Stryker, S. The adjustment of married offspring to their parents. *American Sociological Review,* April 1955, 20, 149-154.

Stryker, S. Role taking accuracy and adjustment. *Sociometry,* 1957, 20, 286-296.

Sussman, M.B. The health pattern in the middle class family. *American Sociological Review,* February 1953, 18, 22-28.

Sussman, M.B. Relationship of adult children with their parents in the United States. In E. Shanas & G.F. Streib (Eds.), *Social structure and the family: Generational relations.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1965. Pp. 62-92.

Sussman, M.B., & Burchinal, L. Kin family network: Unheralded structure in current conceptualizations of family functioning. *Marriage and Family Living,* 1962a, 24, 231-240.

Sussman, M.B., & Burchinal, L. Parental aid to married children: Implications for family functioning. *Marriage and Family Living,* 1962b, 24, 320-332.

Sussman, M.B., & Cogswell, B.E. (Eds.). *Cross national family research.* Leiden: Brill, 1972.

Sussman, M.B., & Slater, S.B. Reappraisal of urban kin networks: Empirical evidence. A paper given at the American Sociological Association, Los Angeles, August 1963.

Tallman, I., Wilson, L., & Straus, M.A. SIMCAR: A game simulation method for cross-national family research. *Social Science Information,* 1974, 8, 121-145.

Terman, L.W. et al. *Psychological factors in marital happiness.* New York: McGraw-Hill, 1938.

Tharp, R.G. Psychological patterning in marriage. *Psychological Bulletin,* March 1963, 60, 97-117.

Thornton, A. Children and marital stability. *Journal of Marriage and the Family,* 1977, 39, 531-540.

Thornton, R., & Grasmick, M.K. *Bibliography of social science research and writings on American Indians.* Minneapolis: Minnesota Center for Urban and Regional Affairs, University of Minnesota, 1979.

Troll, L.E. The family of later life. In C. Broderick (Ed.), *A decade of family research and action.* Minneapolis: National Council on Family Relations, 1971. Pp. 187-215.

Tryon, C.M. The adolescent peer culture. *43rd Yearbook of the National Society for the Study of Education.* Chicago: University of Chicago Press, 1944. Pp. 217-239.

Udry, J.R., Nelson, H.A., & Nelson, R. An empirical investigation of some widely held beliefs about marital interaction. *Marriage and Family Living,* November 1961, 23, 388-390.

Wade, M. *Flexible working hours in practice.* New York: John Wiley & Sons, Inc., 1973.
Waller, W.W., & Hill, R. *The family: A dynamic interpretation.* New York: Dryden Press, 1951.
Watts, H. The New Jersey-Pennsylvania negative income tax experiment. *The American Economics Review,* May 1969.
Winch, R.F. *Mate selection.* New York: Harper and Row, Publishers, 1958.
Wirth, L. Urbanism as a way of life. *American Journal of Sociology,* 1938, 44, 1-24.
Young, M., & Willmott, P. *Family and kinship in East London.* New York: Free Press, 1957.

251 ★ U. S. GOVERNMENT PRINTING OFFICE : 1980 627-512/2402